# SECTION 404 (2) (c) Part 2 TOTAL CMHSP COSTS BY SERVICE CATEGORY AND CMHSP FY 2007

Adults with Mental Illness (Adult MI)

# Overview

The data that are presented in this section were provided by CMHSPs as required by the FY 2007 MDCH/CMHSP contract. Cost data were collected from October 1, 2006 to September 30, 2007 and submitted to MDCH by January 31, 2008. The data in this section represent the total costs associated with providing mental health services to adults with mental illness (adult MI) by service category for each of the 46 CMHSPs within the State of Michigan.

Definitions for terms found in this section are presented in Section 404 (3).

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Allegan	Revenue Code	HCPCS Code	Modifier	Unit						
Service Category	Revenue Code	HCPCS Code	Modiner	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	5	540	\$193,601	\$38,720	\$359	108
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154	- W - W - W - W - W - W - W - W - W - W	PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	8	88	\$43,830	\$5,479	\$498	11
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	110	740	\$493,225	\$4,484	\$667	7
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0		\$0	\$0	
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	50	
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	So	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	, \$0	SO	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	SO	\$0		0
ECT Anesthesia	0370				0	0	\$0	\$0	S0	
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0		SO	
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	S0	\$0	So	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	S0	SO	SO	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	SO	So	SO	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	SO	\$0		0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0		0
ECT Recovery Room	0710				0	0	\$0	\$0	50	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762		,	Hour	0	0	SO	\$0	S0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	S0	
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	3	20	\$4,655	\$1,552	\$233	7
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	19	256	\$19,461	\$1,024	\$76	13
Assessment-Psychiatric Assessment		90801		Encounter	212	212	\$49,862	\$235	\$235	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy		90804		Encounter 20-30 Min	298	595	\$48,082	\$161	\$81	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	, */	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	537	5,361	\$767,749	\$1,430	\$143	10
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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy	<u> </u>	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	41	81	\$17,275	\$421	\$213	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	S0	SO	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	S0	\$0	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	S0	S0	So	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	SO	S0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	So	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	SO	\$0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	^^^^	90847	· · · · · · · · · · · · · · · · · · ·	Encounter	8	24	\$3,067	\$383	\$128	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy	0000 0011 0015	90853		Encounter	22	278	\$33,585	\$1,527	\$121	13
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	S0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	508	1,734	\$171,978	\$339	\$99	3

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862	90000000000000000000000000000000000000	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	***************************************	90870		Encounter	0	0	\$0	\$0		
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0 \$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0		0
Speech & Language Therapy		92508		Encounter	0	0	\$0 \$0	\$0 \$0	S0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0 \$0		\$0	
Psychological Testing PSYCH/PHYS		96101		Per Hour	18	50	\$9,046	\$0	\$0	
Psychological Testing by Technician	- W==>410	96102		Per Hour	0	0	\$9,046 \$0	\$503 \$0	S181	3
Psychological Testing by Comp		96103		Per Hour	0	0	\$0 \$0	S0	S0	0
Assessments-Other		96105		Encounter		0		SO		
Assessments-Other		96110		Encounter	0	0	S0	\$0 \$0	S0	
Assessments-Other		96111		Encounter	0	0	\$0	S0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	S0	\$0 \$0		0_
Neuropsych test by Psych/Phys		96118		Per Hour	0	0		\$0		0_
Neuropsych test by Tech		96119		Per Hour	0	0		S0 S0		
Neuropsych test Admin w/Comp		96120		Per Hour	0	- 0	S0	\$0 \$0	S0	
Physical Therapy		97001		Encounter	0	0		S0	S0 S0	0
Physical Therapy		97002		Encounter	0	0		\$0	S0	0
Occupational Therapy		97003	in.	Encounter	1	1	\$188	\$188	S188	
Occupational Therapy		97004		Encounter	1	1	\$184	\$184	\$184	
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	\$184 \$0	0
Occupational or Physical Therapy	777727211111	97112		15 Minutes	- 0	0	\$0		\$0	
Occupational or Physical Therapy	444	97113		15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97116		15 Minutes	0	0		\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0 \$0	\$0		0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97532		15 Minutes	0	0	S0	\$0	SO	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	So	\$0	SO SO	
Occupational or Physical Therapy		97535		15 Minutes	1	4	\$154	\$154	\$39	4
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	SO	
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	SO SO	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0		\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	SO SO	
Additional Codes-Physician Services		99205		Encounter	0	0	S0	\$0	SO	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	
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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services	<del>-</del>	99215		Encounter	0	0	\$0	S0 S0	\$0	0
Additional Codes-Physician Services		99221		Elicounici	0	0	\$0 \$0		\$0	0
Additional Codes-Physician Services		99222			0	0		\$0	\$0	
Additional Codes-Physician Services		99223			0	0	<u>\$0</u>	\$0	\$0	0
Additional Codes-Physician Services		99231					\$0	\$0	\$0	0
Additional Codes-Physician Services		99232	·		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	77.07.00	99233			0		\$0	SO	S0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	S0_	S0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	S0	<u>\$0</u>	0
Additional Codes-Physician Services		99242		Encounter	0	0	S0		S0	0
Additional Codes-Physician Services		99243			0	0		S0	S0	0
Additional Codes-Physician Services		99243		Encounter	0	0	S0	SO		0
Additional Codes-Physician Services				Encounter	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services	**************************************	99245		Encounter	0	0	SO	\$0	\$0	0
		99251		Encounter	0	0	S0	\$0	S0	0
Additional Codes-Physician Services		99252		Encounter	0	0	S0	S0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	00	S0	S0		0
Additional Codes-Physician Services		99254		Encounter	0	0	S0	\$0	S0	0
Additional Codes-Physician Services		99255		Encounter	0	00	S0	SO	S0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	So	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	50	\$0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	S0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	SO	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428		•	0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	S0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	
Bitewings		D0274			0	0	\$0 \$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2331			0	0	20	\$0		
Resin based comp-two surfaces, ant		D2331 D2332			0	- 0		\$0	\$0	0
Resin based comp-three surfaces, an									\$0	0
Resin based comp-one surface, post		D2391			0	0	<u>\$0</u>	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	<u></u>	0

### CMHSP Cost Data by Service Category

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant	_	D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399	-	Items	0		\$0		SO	
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	S0	
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	S0	0
Assessment		H0002		Encounter	45	45	\$3,288	\$73	\$73	-
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$3,288	\$0	\$0 \$0	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004	78.0	15 Minutes	0	0	\$0	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	S0			0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	S0		0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0 \$0	\$0		
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	SO	\$0	S0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	<u>so</u>	\$0	S0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	S0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	9	30	\$5,054	\$562	\$168	3
Assessment		H0031		Encounter	608	641	\$103,316	\$170	\$161	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	670	1,477	\$144,096	\$215	\$98	2
Substance Abuse: Pharmalogical Support - Suboxane		H0033	•	Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	3	154	\$7,149	\$2,383	\$46	51
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	SO SO	0
Peer Directed and Operated Support Services		H0038		15 minutes	14	318	\$15,114	\$1,080	\$48	23
Peer Directed and Operated Support Services		NA			24	0	\$134,651	\$5,610	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	118	9,895	\$487,830	\$4,134	\$49	84
Community Living Supports in Independent living/own home		H0043		Per diem	3	731	\$100,017	\$33,339	\$137	244
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	
Behavior Management Review	* **	H2000		Encounter	5	10	\$682	\$136	\$68	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$002	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	35	122	\$6,033	\$172	\$49	3
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	19	3,854	\$30,755	\$1,619	\$8	203
Community Living Supports (15 Minutes)		H2015		15 Minutes	5	52,434	\$190,233	\$38,047	\$4	10,487
Community Living Supports (Daily)		H2016		Per Diem	17	3,531	\$83,608	\$4,918	\$24	208
Community Living Supports (Daily)  Community Living Supports (Daily)		H2016	TF	Per Diem	9	2,098	\$148,503	\$16,500	\$71	233
Community Living Supports (Daily)  Community Living Supports (Daily)		H2016	TG	Per Diem	13	2,050	\$449,876	\$34,606	\$219	158
Behavior Services		H2019	10	15 Minutes	0	2,030	\$0	\$0	\$219	0
		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021			0	0	\$0	\$0	\$0	0
Wraparound		H2022 H2023		Days 15 minutes	35	2,201	\$71,339	\$2,038	\$32	63
Supported Employment Services		H2023 H2027		15 minutes	35	2,201	\$71,339	\$2,038	\$32 \$0	
Mental Health Therapy		Π∠U21		13 Williams	U	U	20	20		<u>U</u> _

Michigan Department of Community Health
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Allegan										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	5	3,651	\$8,343	\$1,669	\$2	730
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0		\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0		
Family Training	, a series	S5111		Encounter	0	0	\$0	\$0	S0	0
Foster Care		S5140		Days	0	0	\$0	\$0	S0	
Foster Care		S5145		Days	0	0	\$0 \$0	S0	S0	
Respite		S5150		15 Minutes	0	0			\$0 \$0	
Respite		S5151		Per Diem		0		S0	\$0 \$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	S0	S0	
Personal Emergency Response System (PERS)		S5161		Month	0	0		S0	S0	
Environmental Modification		S5165		Service	0	0	S0	S0	S0	0
Enhanced Medical Equipment-Supplies		S5199	<del></del>	Items		0	\$0 \$0	\$0 \$0	S0	
Occupational or Physical Therapy		S8990		Encounter		0		SO	S0	0
Health Services	***************************************	S9445		Encounter	0	0	\$0 \$0	\$0 \$0		0
Health Services		S9446		Encounter		0		S0	S0	0
Health Services		S9470		Encounter	0	0		S0	S0 S0	0
Intensive Crisis Stabilization-Enrolled Program		S9484	•	Hour	0	0	\$0	S0		0
Reidential Room and Board		S9976		Days	0	0	\$0 \$0	\$0 \$0	S0	0
Assessment		T1001		Encounter	0	0		\$0	\$0	0
Health Services		T1002		Up to 15 min	1	21	\$397	\$397	\$0	0
Respite Care		T1005		15 Minutes	0	0	\$0	\$0	\$19 \$0	21
Respite Care		T1005	TD	15 Minutes		0	\$0		\$0	0
Respite Care		T1005	TE	15 Minutes	0	0		\$0		0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	S0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0 \$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	,	15 minutes	76	2,808	\$139,698	\$1,838	\$50	37
Targeted Case Management		T1017		15 minutes	198	8,687	\$422,275	\$2,133	\$49	44
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	35	857	\$34,899	\$997	\$41	24
Personal Care in Licensed Specialized Residential Setting		T1020		Days	32	7,070	\$49,674	\$1,552	\$7	
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	1	365	\$6,013	\$6,013	\$16	365
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	1	216	\$38,102	\$38,102	\$176	216
Assessments		T1023		Encounter	187	238	\$29,222	\$156	\$176	
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	1 0
Transportation		T2001				0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0		\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		Encounter / Trip	0	0	\$0	\$0	\$0	
Transportation		T2005			0	0		\$0	\$0 \$0	
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0 \$0	\$0 \$0	
Enhanced Medical Equipment-Supplies		T2028		Items		0		\$0 \$0		0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0 \$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0 \$0	
			<del>-</del>		0					0
Community Living Supports-Therapeutic Camping		T2037 T2038		Encounter / Trip  Month	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0		\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		12039		Items		0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					12	0	\$76,591	\$6,383	\$0	0
Other					0	0	<u>\$0</u>	\$0	\$0	0
Aggregate for 'J' Codes		ALL			21	0	\$3,283	\$156	\$0	00

CMHSP Cost Data by Service Category			Adults with N	Mental Illness		Fiscal Yea	r 2006-2007	State of Michigan				
Allegan Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case		
Total Population and Cost					1,103		\$4,645,983					

Therapy-Individual Therapy

Therapy-Individual Therapy

Therapy-Individual Therapy

Substance Abuse: Outpatient Treatment

Substance Abuse: Outpatient Treatment

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Encounter 20-30 Min

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 45-50 Min

175

0

0

0

478

273

0

0

1,524

\$16,053

\$149,354

\$0

\$0

\$0

\$92

\$0

\$0

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\$59

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0900, 0914, 0915,

0900, 0914, 0915,

0916, 0919

0916, 0919

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AuSable Valley Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	0	Cost/Case	0	11.50
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	90806		Encounter 45-50 Min	O	0	Cost		Cost/Unit	Unit/Case
	0916, 0919			Encounter 45-50 Min	U	O	\$0	\$0	\$0	0
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	11	17	\$2,033	\$185	\$120	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	SO	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	S0	SO	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	So	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	SO	\$0	so	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	SO	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	SO	SO	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	- 0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	***	90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	<u>,                                      </u>	90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	5	6	\$717	\$143	\$120	. 1
Therapy-Family Therapy		90847		Encounter	30	68	\$8,131	\$271	\$120	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	110	418	\$24,989	\$227	\$60	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	S0	0
Medication Review		90862		Encounter	347	868	\$67,890	\$196	\$78	3

Civilish Cost Data by Service Category			Addits with M	entai iiniess		Fiscal Year	2006-2007		State of	Michigan
AuSable Valley				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	. 0	\$0	SO	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	S0	SO	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	S0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	- 1,-	92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	24	42	\$5,021	\$209	\$120	
Psychological Testing by Technician		96102		Per Hour	0	0	SO	SO	\$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	S0	So	S0	0
Assessments-Other		96105		Encounter	0	0	SO	S0		0
Assessments-Other		96110		Encounter	1	1	\$120	\$120	\$120	1
Assessments-Other		96111		Encounter	0	- 0	\$0	S0 S0	\$120 \$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	S0	S0		
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0			0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0	\$0 \$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0			\$0 \$0		0
Physical Therapy		97001	_	Encounter	- 0	0	S0 S0	\$0 \$0	S0	0
Physical Therapy		97002		Encounter	0	0			\$0	0
Occupational Therapy		97003		Encounter	0				\$0	0
Occupational Therapy		97004	·-	Encounter	0	0	S0	S0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy		97112	_	15 Minutes	0	- 0		S0	<u>\$0</u>	0
Occupational or Physical Therapy		97113		15 Minutes	0			\$0	S0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	S0	S0	0
Occupational or Physical Therapy		97124		15 Minutes		0	\$0	S0	\$0	0
Occupational or Physical Therapy		97140	<del></del> -	15 Minutes	0	0	\$0 \$0	\$0 \$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0			\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0 \$0		\$0	0
Occupational or Physical Therapy		97532			0	0		\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes 15 Minutes	0	0	\$0 \$0	\$0 \$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes		0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537			0	0		\$0	\$0	0
		97542		15 Minutes	0		\$0		\$0	0
Occupational or Physical Therapy	· · · · · · · · · · · · · · · · · · ·	97703		15 Minutes	0	0	\$0	\$0	\$0	
Occupational Therapy				15 Minutes	<del> </del>		\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	02	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	S0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	S0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	. 0	. 0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	00	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	. 0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	9	18	\$242	\$27	\$13	2
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	S0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	S0	0
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State of Michigan

# CMHSP Cost Data by Service Category

AuSable Valley				Unit						_
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214	****	Encounter	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0		S0	
Additional Codes-Physician Services		99221			2	2	\$78	\$39	\$39	1
Additional Codes-Physician Services		99222			5	5	\$564	\$113	\$113	1
Additional Codes-Physician Services		99223			1	1	\$89	\$89	\$89	<u>i</u>
Additional Codes-Physician Services		99231			7	40	\$1,216	\$174	\$30	6
Additional Codes-Physician Services		99232			3	5	\$318	\$106	\$64	
Additional Codes-Physician Services		99233			0	0	\$0	\$0	S0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0 \$0	
Additional Codes-Physician Services		99241		Encounter	0	0	\$0 \$0	\$0		
Additional Codes-Physician Services		99242		Encounter	0	0	S0		\$0	
Additional Codes-Physician Services		99243		Encounter	0	0		\$0	\$0 \$0	0
Additional Codes-Physician Services		99244		Encounter	0	0				0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0 \$0		\$0	
Additional Codes-Physician Services		99251		Encounter	0	0		S0	<u>\$0</u> \$0	
Additional Codes-Physician Services		99252		Encounter	0	0	S0	\$0	\$0	0
Additional Codes-Physician Services		99253		Encounter	0	0	\$0			0
Additional Codes-Physician Services		99254		Encounter	0	0		\$0 S0	\$0 \$0	
Additional Codes-Physician Services		99255	V 200 - 2011 - 1	Encounter	0	0	\$0	S0	\$0	
Additional Codes-Physician Services		99261	700.00	Encounter	0	0	S0	\$0	<u>\$0</u> \$0	
Additional Codes-Physician Services		99262		Encounter	0	0		S0	\$0 \$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	S0	S0	\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	S0	
Additional Codes-Physician Services		99272	****	Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services		99273		Encounter	0	0	S0	\$0	\$0	
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0		0
Transportation		A0090		Per mile	0	0	\$0	\$0		0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical	A PALAMETER AND A PARAMETER AN	D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	SO.	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
				*						

# CMHSP Cost Data by Service Category

						110001 100	2000-2007		J	iviicingan
AuSable Valley Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	\$0 \$0	\$0		0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0 \$0	\$0	\$0	0
Behavior Management/dental, by report	<del></del>	D9920			0		\$0 \$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	-	E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	11	55	\$3,443	\$313	\$63	5
Substance Abuse: Individual Assessment		H0001		Encounter	0		\$3,443	\$0	\$0 \$0	
Assessment		H0002		Encounter	81	81	\$9,667	\$119		
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$9,667	\$119 \$0	\$119	<u> </u>
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	S0 S0	\$0 \$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	S0	<u>so</u>	SO	
Substance Abuse: Case Management		H0006			0	0	\$0		SO	
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0 \$0			- 0
Substance Abuse: Sub-Acute Detoxification	1002	H0012	<del></del> -	Days	0	0			\$0 \$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	S0		\$0 \$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	S0 S0	\$0	0
Crisis Residential Services	<del> ' '</del>	H0018		Days	0	0		SO		0
Substance Abuse: Residential	1002	H0018		Days	0	0	S0	\$0		0
Substance Abuse: Residential	1002	H0019		Days	0	0			S0	0
Substance Abuse: Methadone		H0020	-	Encounter	0	0	S0		S0	0
Substance Abuse: Early Intervention		H0022	-	Encounter	0	0		\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	S0	\$0	S0	
Prevention Services - Direct Model		H0025		Face to Face Contact	306	501	\$53,499	S175	\$107	2
Assessment		H0031		Encounter	646	708	\$102,148	\$158	\$144	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	562	597	\$71,385	\$127	\$120	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034	-	15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	28	2,761	\$170,906	\$6,104	\$62	99
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0,104	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA NA		13 11111400	0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	71	8,624	\$751,630	\$10,586	\$87	121
Community Living Supports in Independent living/own home		H0043		Per diem	9	3,077	\$482,627	\$53,625	\$157	342
Respite		H0045		Per Diem	0	0	\$0	\$33,023	\$137	0
Substance Abuse: Individual Assessment		H0049		Encounter		0	\$0	\$0	SO SO	0
Behavior Management Review		H2000		Encounter	0	0			\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0		\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	274	2,194	\$64,717	\$236	\$29	8
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	25	1,674	\$16,455	\$658	\$10	67
		H2014		15 Minutes	8	18,380	\$79,255	\$9,907	\$4	2,298
Community Living Supports (15 Minutes)		H2016		Per Diem	1	165	\$32,010	\$32,010	\$194	165
Community Living Supports (Daily)			TF	Per Diem	0	165	\$32,010	\$32,010	\$194	0
Community Living Supports (Daily)		H2016 H2016	TG	Per Diem	33			\$9,596	\$185	52
Community Living Supports (Daily)		H2016 H2019	16	15 Minutes	0	1,712	\$316,670 \$0	\$9,596	\$185	0
Behavior Services		H2019 H2021		15 Minutes	3	153	\$0 \$8,441		\$55 \$55	
Wraparound			.,			0		\$2,814		51
Wraparound		H2022		Days	0	- <del></del>	\$0	\$0	\$0	0
Supported Employment Services  Mental Health Therapy		H2023 H2027		15 minutes 15 Minutes	38	21,321	\$209,585 \$0	\$5,515 \$0	\$10 \$0	561

AuSable Valley										υ
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	SO SO	\$0	\$0	0
Transportation	· 18	S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	6	84	\$1,908	\$318	S23	14
Family Training		S5111		Encounter	6	23	\$4,239	\$707	\$184	4
Foster Care		S5140		Days	0	0	SO SO	SO	S0	0
Foster Care		S5145		Days	0	0	S0			
Respite		S5150		15 Minutes	I	528	\$396	\$396	S1	528
Respite		S5151		Per Diem	0	0	S0	S0		0
Personal Emergency Response System (PERS)		S5160	·	Encounter	0	0	S0	\$0 \$0		0
Personal Emergency Response System (PERS)		S5161		Month	0	0	S0			
Environmental Modification		S5165		Service	0	0	S0			
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0		S0	
Occupational or Physical Therapy		S8990		Encounter	0	0	S0	\$0		
Health Services		S9445		Encounter	0	0	S0			
Health Services		S9446		Encounter	0	0	S0	S0		
Health Services		S9470		Encounter	0	0	S0	S0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0		\$0 \$0		
Reidential Room and Board	****	S9976		Days	0	0	\$0	S0		0
Assessment		T1001		Encounter	208	225	\$12,133	\$58	S54	
Health Services		T1002		Up to 15 min	378	1,770	\$23,861	\$63	S13	5
Respite Care		T1005		15 Minutes	1	1,022	\$4,251	\$4,251	\$4	1,022
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	SO	SO	SO SO	
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	SO SO	SO SO	
Family Psycho-Education	· · · · · · · · · · · · · · · · · · ·	T1015		Encounter	5	14	\$1,272	\$254	\$91	3
Supports Coordination/Wrap Facilitation		T1016	* ***	15 minutes	2	30	\$1,969	\$985	\$66	15
Targeted Case Management		T1017		15 minutes	99	7,877	\$517,046	\$5,223	\$66	80
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0		\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	10	1,711	\$18,584	\$1,858	\$11	171
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	115	146	\$17,458	\$152	\$120	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		*	0	0	\$0	\$0	\$0	0
Transportation	·	T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items		0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL -			30	0	\$28,836	\$961	\$0	0
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CMHSP Cost Data by Service Category			Adults with M	ental Illness		Fiscal Year 2006-2007				State of Michigan		
AuSable Valley Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case		
Total Population and Cost					1,188		\$3,501,872					

CMHSP Cost Data by Service Category	Adults with Mental Illness	Fiscal Year 2006-2007	State of Michigan
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Barry										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	4	172	\$55,556	\$13,889	\$323	43
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	58	401	\$241,050	\$4,156	\$601	7
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	SO SO	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	S0	\$0	SO	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	SO	\$0	SO	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	S0	0
ECT Anesthesia	0370				0	0	\$0	\$0	S0	
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	50	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434	_	-	# of treatments	0	0	\$0	\$0 \$0		0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	S0	\$0	S0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0		S0	- 0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	S0	\$0	SO	- 0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	50	0
ECT Recovery Room	0710				0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762	<i>*</i> -		Hour	0	0	\$0	\$0	\$0	- 0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	- 0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		<del></del>	# of visits	0	О	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	-	00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	65	66	\$9,741	\$150	\$148	1
Substance Abuse: Psychiatric Evaluation	-	90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	239	387	\$28,538	\$119	\$74	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	779	3,938	\$594,891	\$764	\$151	5
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Barry Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	0710, 0717	90807		Encounter 45-50 Min	0	0	S0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy	,,	90808		Encounter 75-80 Min	34	43	\$9,513	\$280	S221	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	, , , , , , , , , , , , , , , , , , , ,	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0			
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	SO	\$0	So	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0		\$0		
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	SO	SO	S0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	So	S0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	SO	\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	<u></u>	90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	. 0
Substance Abuse: Psychotherapy (Individual Therapy) Therapy-Individual Therapy		90826 90827		Encounter 45-50 Min Encounter 45-50 Min	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90828		Encounter 75-80 Min	0		\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0		- 0
Therapy-Family Therapy		90846		Encounter	0	<u>0</u>	\$0	\$0		0
Therapy-Family Therapy		90847		Encounter	175	386	\$55,085	\$315	\$143	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	,	90849	•	Encounter	0	0	\$0	\$0	\$0	
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	271	1,983	\$93,114	\$344	\$47	7
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	SO	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	S0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	236	926	\$39,742	\$168	\$43	4

Barry				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870	******	Encounter	0	0	SO	\$0		0
Assessments-Other	-	90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506	***************************************	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	<del>-</del>	Encounter	0	0	\$0	\$0	\$0	- 0
Speech & Language Therapy		92508		Encounter	0	0	\$0	S0	\$0	
Speech & Language Therapy		92526		Encounter	0	0	\$0	S0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	S0	SO	\$0	0
Psychological Testing by Technician		96102		Per Hour	8	16	\$2,360	\$295	\$147	2
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	SO	SO SO	0
Assessments-Other		96105		Encounter	0	0	S0	\$0	S0	0
Assessments-Other	***************************************	96110		Encounter	0	0		S0		
Assessments-Other		96111		Encounter	0	0		SO SO		
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0		S0	SO SO		0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0		\$0		
Neuropsych test by Tech		96119		Per Hour	0	0	S0	so		0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0		S0	SO SO	
Physical Therapy		97001		Encounter	0	0	S0	SO SO	S0	
Physical Therapy	· · · · · · · · · · · · · · · · · · ·	97002		Encounter	0	0	SO		S0	
Occupational Therapy		97003		Encounter	2	2	\$414	\$207	S207	
Occupational Therapy	* ****	97004		Encounter	0	0	\$0 \$0	S0	S0	
Occupational or Physical Therapy		97110		15 Minutes	5	102	\$332	\$66	S3	20
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	S0	
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	S0	
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0		0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	- SO		
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0		0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	SO SO	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	SO SO	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	S0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services		99205		Encounter	0	0	SO	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	<del></del>	99213		Encounter	0	0		\$0	S0	0

05/31/2008

Barry				TIi-						
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	<b>S</b> 0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			1	1	\$93	\$93	\$93	1
Additional Codes-Physician Services		99222				1	\$131	\$131	\$131	1
Additional Codes-Physician Services		99223			1	1	\$170	\$170	\$170	
Additional Codes-Physician Services		99231			2	9	\$534	\$267	\$59	
Additional Codes-Physician Services		99232			3	7	\$534	\$178	\$76	
Additional Codes-Physician Services		99233			1	1	\$93	\$93	\$93	
Additional Codes-Physician Services		99238		30 Minutes or less	3	3	\$254	\$85	\$85	1
Additional Codes-Physician Services		99241		Encounter	121	293	\$10,803	\$89	S37	
Additional Codes-Physician Services		99242		Encounter	0	0	S0	SO		
Additional Codes-Physician Services		99243		Encounter	0	0	S0		SO SO	
Additional Codes-Physician Services		99244		Encounter	0	0	\$0			
Additional Codes-Physician Services	•	99245		Encounter	0	0			\$0	
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	50		
Additional Codes-Physician Services		99252		Encounter	0	0			S0	
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	50	0
Additional Codes-Physician Services		99254	,	Encounter	0	0				0
Additional Codes-Physician Services	·	99255		Encounter	0	0	SO			
Additional Codes-Physician Services		99261		Encounter	0	0			\$0	
Additional Codes-Physician Services		99262		Encounter	0	0	SO	\$0	S0	0
Additional Codes-Physician Services		99263		Encounter	0	0	S0		S0	0
Additional Codes-Physician Services		99271		Encounter	0	0	SO		S0	
Additional Codes-Physician Services		99272		Encounter	0	0	S0	SO		
Additional Codes-Physician Services		99273	-	Encounter	0	0	\$0		SO SO	
Additional Codes-Physician Services	-	99274		Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	SO	
Medication Administration		99506		Encounter	0	0	\$0	50	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	SO	0
Transportation		A0090		Per mile	0	0	SO	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	SO	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	S0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation	- Commercial Commercia	D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
					-					

# CMHSP Cost Data by Service Category

Barry				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	
Peridontal, main		D4910			0	0	\$0	\$0	\$0	
Surgical removal of erupted tooth		D7210		-	0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	
Behavior Management/dental, by report		D9920		-	0	0	\$0	\$0	S0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	14	79	\$3,482	\$249	\$44	6
Substance Abuse: Individual Assessment		H0001	·	Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	506	516	\$83,974	\$166	\$163	1
Substance Abuse: Individual Assessment		H0002	-	Encounter	0	0	SO	SO	SO	<u> </u>
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	SO	S0	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	SO	SO	0
Substance Abuse: Case Management		H0006	2.100.0		0	0	S0		SO SO	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	50	\$0	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	S0	S0	S0	
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	S0	SO	SO	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015	,	Days	0	0	S0	SO	SO SO	0
Crisis Residential Services		H0018		Days	4	23	\$5,750	\$1,438	\$250	6
Substance Abuse: Residential	1002	H0018		Days	0	0	SO	\$0		
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	so	
Substance Abuse: Methadone		H0020		Encounter	0	0	S0	\$0	S0	
Substance Abuse: Early Intervention		H0022		Encounter	0	0		S0	SO	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	SO	S0	so	0
Prevention Services - Direct Model	· · · · · · · · · · · · · · · · · · ·	H0025		Face to Face Contact	0	0	S0	SO	\$0	0
Assessment		H0031		Encounter	111	135	\$12,397	\$112	\$92	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	
Treatment Planning		H0032		Encounter	52	64	\$9,645	\$185	\$151	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	SO	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	1	52	\$2,292	\$2,292	\$44	52
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	8	208	\$2,278	\$285	\$11	26
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	10	557	\$18,716	\$1,872	\$34	56
Community Living Supports in Independent living/own home	• • •	H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049	•	Encounter	0	0	SO	\$0	\$0	0
Behavior Management Review		H2000		Encounter	1	1	\$192	\$192	\$192	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	135	800	\$42,017	\$311	\$53	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	16	17,678	\$140,913	\$8,807	\$8	1,105
Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	So	0
Community Living Supports (Daily)		H2016	TG	Per Diem	6	2,082	\$219,774	\$36,629	\$106	347
Behavior Services		H2019		15 Minutes	0	0	SO	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	S0	0
Wraparound		H2022		Days	0	0	\$0	\$0	SO	0
Supported Employment Services		H2023		15 minutes	0	0	50	\$0	\$0	0
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0

Barry				***						J
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0		\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0 \$0	
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	
Family Training		S5110		15 Minutes	11	284	\$2,070	\$188	\$7	0
Family Training		S5111		Encounter	0	0	\$0	\$100	\$0 \$0	26
Foster Care		S5140		Days	0	0	\$0			0
Foster Care		S5145		Days	0	0	\$0 \$0	S0		0
Respite	-	S5150		15 Minutes	5	4,476	\$6,714	\$1,343	\$0 \$2	0
Respite		S5151	-	Per Diem	0	0	S0,714	\$1,343	\$2 \$0	895
Personal Emergency Response System (PERS)		S5160		Encounter	0	0				0
Personal Emergency Response System (PERS)		S5161		Month	0	0		S0	<u></u> <u></u> <u></u>	
Environmental Modification		S5165		Service	0	0		S0	S0	
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	S0	S0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0 \$0	S0	\$0	
Health Services	***************************************	S9445	-	Encounter	120	390	S11,845	S99	\$30	3
Health Services		S9446		Encounter	9	198	\$3,971	\$441	\$20	22
Health Services	7400-0-1	S9470		Encounter	0	0	S0	\$0	\$0 \$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	41	201	\$16,102	\$393	\$80	
Reidential Room and Board		S9976		Days	0	0	\$10,102	\$0	\$0	
Assessment		T1001		Encounter	9	9	\$1,068	\$119	S119	
Health Services		T1002		Up to 15 min	34	70	\$1,661	\$49	\$24	2
Respite Care		T1005		15 Minutes	0	0	\$0	SO	\$0	0
Respite Care		T1005	TD	15 Minutes	0	0	S0	S0		
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	SO SO	
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	SO	
Family Psycho-Education		T1015		Encounter	17	45	\$6,789	\$399	\$151	3
Supports Coordination/Wrap Facilitation		T1016		15 minutes	46	740	\$73,223	\$1,592	\$99	16
Targeted Case Management		T1017		15 minutes	56	1,481	\$150,769	\$2,692	\$102	26
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	2	27	\$1,510	\$755	\$56	14
Personal Care in Licensed Specialized Residential Setting		T1020		Days	6	1,932	\$23,357	\$3,893	\$12	322
Personal Care in Licensed Specialized Residential Setting	•	T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	1	150	\$16,988	\$16,988	\$113	150
Assessments		T1023		Encounter	58	65	\$18,407	\$317	\$283	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	14	803	\$11,040	\$789	\$14	57
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	S0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	S0	SO	0
Other					0	0	\$0	\$0	S0	0
Aggregate for 'J' Codes		ALL			0		\$0	\$0	S0	0

Total Population and Cost					1,183		\$2,029,890				
Barry Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
CMHSP Cost Data by Service Category			Adults with M	Iental Illness		Fiscal Year 2006-2007			State of Michigan		

Bay-Arenac				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	10	1,669	\$649,516	\$64,952	\$389	167
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	5	52	\$22,832	\$4,566	\$439	10
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	250	1,504	\$873,170	\$3,493	\$581	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	SO	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272		-	# of items	0	0	So	\$0	S0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	S0	0
ECT Anesthesia	0370				0	0	S0	S0	50	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	S0	S0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	S0	SO	S0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	S0	S0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	S0	\$0	S0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	S0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	. 0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0 	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	SO	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	. 0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	126	1,373	\$71,639	\$569	\$52	11
Assessment-Psychiatric Assessment		90801		Encounter	972	1,036	\$139,196	\$143	\$134	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment	-11	90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	02	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	287	422	\$16,966	\$59	\$40	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	1,299	11,145	\$767,427	\$591	\$69	9

Michigan Department of Community Health
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Bay-Arenac				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	SO	\$0	0
Therapy-Individual Therapy		90807	,	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	SO	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	84	156	\$20,369	\$242	\$131	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	50	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	SO	S0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	S0	So	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0		\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	1	1	\$26	\$26	\$26	1
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	so	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	8	43	\$1,176	\$147	\$27	5
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	<del></del>	90824		Encounter 20-30 Min	0	. 0	\$0	\$0	\$0	0
Therapy-Individual Therapy Substance Abuse: Psychotherapy (Individual Therapy)		90826 90826		Encounter 45-50 Min Encounter 45-50 Min	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Therapy-Individual Therapy		90828		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0		\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	5	9	\$590	\$118	\$66	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	· · · · · · · · · · · · · · · · · · ·	90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	. 0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	227	2,075	\$87,338	\$385	\$42	9
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	SO	\$0	0
Medication Review		90862		Encounter	2,128	9,456	\$402,907	\$189	\$43	4

State of Michigan

Day Assess						r isour rour	2000 2007		5.0.0	gan
Bay-Arenac Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862	**************************************	Encounter	0	0	\$0	\$0	SO	0
Additional Codes-ECT Physician	· · · · · · · · · · · · · · · · · · ·	90870		Encounter	0	0	\$0			0
Assessments-Other		90887		Encounter	0		\$0		\$0	
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507	-	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0		\$0		0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0			
Psychological Testing PSYCH/PHYS	111111111111111111111111111111111111111	96101		Per Hour	10	45	\$12,507	\$1,251	S278	
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	\$1,231	\$278 \$0	
Psychological Testing by Comp		96103		Per Hour	0	0		S0	S0 S0	0
Assessments-Other	***************************************	96105		Encounter	0	0		S0		
Assessments-Other		96110		Encounter	0			S0		
Assessments-Other		96111		Encounter	0	0	\$0	\$0 \$0		0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0		S0		<u>\$0</u>	0
Neuropsych test by Psych/Phys	***************************************	96118		Per Hour	0	0	S0		<u></u>	0
Neuropsych test by Tech		96119		Per Hour	0			<u>\$0</u>	\$0	
Neuropsych test Admin w/Comp		96120		Per Hour	0		S0	S0	S0	0
Physical Therapy		97001		Encounter	2		S0	\$0	S0	0
Physical Therapy		97002		Encounter		- 2	\$160	\$80	\$80	1
Occupational Therapy		97003		Encounter	3		S0	SO	S0	0
Occupational Therapy		97004		Encounter	0	3	S241		S80	1
Occupational or Physical Therapy		97110		15 Minutes	4	0 72	S0	SO	S0	0
Occupational or Physical Therapy	<del></del>	97112		15 Minutes	0	73	\$1,559 \$0	\$390	S21	18
Occupational or Physical Therapy		97113		15 Minutes	0			50	S0	0
Occupational or Physical Therapy		97116		15 Minutes	0		S0	\$0 \$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0			S0	0
Occupational or Physical Therapy		97140		15 Minutes	0		\$0 \$0	\$0 \$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	S0	\$0 \$0	S0	0
Occupational or Physical Therapy	<del></del>	97530		15 Minutes	3	35	\$606		S0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$202 \$0	\$17 \$0	12
Occupational or Physical Therapy		97533		15 Minutes	0		\$0	\$0 \$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	***************************************	97537		15 Minutes	0		S0	\$0	\$0	0
Occupational or Physical Therapy		97542	<del>.</del>	15 Minutes	0		\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0			\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	S0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	S0	\$0	\$0 \$0	
Occupational Therapy		97760		15 Minutes	0		\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762		15 Minutes	0		\$0 \$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0				S0	
		97803		15 Minutes	23	351	\$5,443	\$237	\$16	0
Assessment or Health Services						331				15
Health Services		97804		30 Minutes	0		\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter		0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	S0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	SO SO	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0		\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	176	313	\$2,427	\$14	\$8	2
Additional Codes-Physician Services		99212		Encounter			S0	SO	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

Bay-Arenac				Unit						Ü
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0		\$0	
Additional Codes-Physician Services		99221			17	17	\$918	\$54	\$54	
Additional Codes-Physician Services		99222			299	342	\$38,260	\$128	\$112	1
Additional Codes-Physician Services		99223			11	12	\$1,831	\$166	\$153	<u>-</u> 1
Additional Codes-Physician Services		99231			297	1,254	\$41,446	\$140	\$33	<u>.</u>
Additional Codes-Physician Services		99232			57	140	\$1,816	\$32	\$13	2
Additional Codes-Physician Services		99233			7	14	\$1,107	\$158	\$79	
Additional Codes-Physician Services		99238		30 Minutes or less	246	289	\$11,547	\$47	\$40	1
Additional Codes-Physician Services		99241		Encounter	0	0	50	50	S0	
Additional Codes-Physician Services		99242		Encounter	0	0	50			
Additional Codes-Physician Services		99243		Encounter	0	0		SO		
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	S0	S0	0
Additional Codes-Physician Services		99245		Encounter	0					
Additional Codes-Physician Services		99251		Encounter	9	9	\$417	\$46	S46	<u></u>
Additional Codes-Physician Services		99252		Encounter	23	23	\$1,419	\$62	S62	
Additional Codes-Physician Services		99253		Encounter	15	15	\$1,327	S88	\$88	<u>-</u>
Additional Codes-Physician Services		99254		Encounter		0	\$0 \$0	So	S0	
Additional Codes-Physician Services		99255		Encounter	0	0	So	so	So So	
Additional Codes-Physician Services		99261		Encounter	0	0	S0	SO	\$0 \$0	
Additional Codes-Physician Services	*	99262		Encounter	0	0	SO	S0	SO SO	0
Additional Codes-Physician Services		99263	_	Encounter	0	0	S0	SO	S0	
Additional Codes-Physician Services		99271		Encounter	0	0	SO	SO	S0	
Additional Codes-Physician Services		99272		Encounter	0	0	SO	\$0		
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	SO	so	0
Transportation		A0080		Per mile	5	1,471	\$702	\$140	SO	294
Transportation		A0090		Per mile	0	0	SO	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	SO	\$0	\$0	
Transportation		A0110		Per one-way trip	0	0	SO	\$0	\$0	0
Transportation		A0120		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170	_		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	2	134	\$586	\$293	\$4	67
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			2	2	\$236	\$118	\$118	1
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	SO	0
Bitewings		D0274		· · · · · ·	0		\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
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Michigan Department of Community Health
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### CMHSP Cost Data by Service Category

Bay-Arenac				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0		\$0	\$0	
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0 \$0	\$0	\$0	
Behavior Management/dental, by report		D9920			0	0	\$0		\$0	
Enhanced Medical Equipment-Supplies		E1399		Items	1	1	\$70	\$70		0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0 \$0		\$70 \$0	1
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0		
Assessment		H0002		Encounter	0	0		SO	\$0	0
Substance Abuse: Individual Assessment		H0002	_	Encounter	0	0	S0	\$0 \$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	SO	\$0	SO	0
Substance Abuse: Case Management		H0006			0	0	S0	S0		
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	S0	S0	S0	
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0		S0	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0 \$0	S0	S0	- 0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services		H0018		Days	0	0	\$0	S0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0		So	\$0	
Substance Abuse: Residential	1002	H0019		Days	0	0		\$0	S0	0
Substance Abuse: Methadone		H0020	_	Encounter	0	0	\$0	\$0	so	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	S0	\$0	SO SO	0
Peer Directed and Operated Support Services		H0023	_	Encounter	0	0	\$0		S0	
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	S0		
Assessment		H0031	_	Encounter	678	704	\$82,033	\$121	\$117	
Substance Abuse: Assessment		H0031	***	Encounter	0	0	S0	\$0	SO SO	
Treatment Planning		H0032		Encounter	618	721	\$37,612	\$61	\$52	
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0			0
Health Services	* *	H0034	_	15 Minutes	0	0	S0	\$0	\$0	0
Home Based Services		H0036	***	15 Minutes	64	6,003	\$276,752	\$4,324	\$46	94
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	116	10,369	\$90,343	\$779	\$9	89
Peer Directed and Operated Support Services		NA			116	0	\$120,432	\$1,038	S0	0 -
Assertive Community Treatment (ACT)		H0039		15 Minutes	110	12,486	\$1,229,833	\$11,180	\$98	114
Community Living Supports in Independent living/own home		H0043		Per diem	6	1,593	\$166,164	\$27,694	\$104	266
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	S0	\$0	\$0	0
Behavior Management Review		H2000	•	Encounter	4	4	\$424	\$106	\$106	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$100	. 0
Crisis Intervention		H2011		15 Minutes	278	1,530	\$65,781	\$237	\$43	
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	38	94,225	\$113,955	\$2,999	\$1	2,480
		H2015		15 Minutes	46	42,223	\$383,013	\$8,326	\$9	918
Community Living Supports (15 Minutes)		H2016		Per Diem	5	1,718		\$10,839	\$32	344
Community Living Supports (Daily)		H2016	TF	Per Diem	16	4,312	\$54,193 \$234,514	\$10,839	\$32 \$54	270
Community Living Supports (Daily)			TG							
Community Living Supports (Daily)		H2016	16	Per Diem	29	7,647	\$950,016	\$32,759 \$0	\$124	264
Behavior Services		H2019		15 Minutes			\$0		\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022	-	Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	44	39,309	\$100,242	\$2,278	\$3	893
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0

Bay-Arenac										<i>G</i>
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	134	145,604	\$320,589	\$2,392	\$2	1,087
Substance Abuse: Outpatient Care		H2035	·	Hour	0	0	\$320,389	\$2,392	\$0	
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	
Transportation		S0209		Per Mile	0	0		\$0		0
Transportation		S0215		Per Mile	0	0			\$0	0
Family Training		S5110		15 Minutes	0	0		\$0	\$0	0
Family Training		\$5111	<u> </u>	Encounter	1	1		\$0	\$0	0
Foster Care		S5140		Days	0	0	\$417	\$417	\$417	1
Foster Care		S5145	***	Days	- 0	0	50	S0	\$0	0
Respite		S5150		15 Minutes	- 0	0	\$0	\$0	S0	
Respite		S5151		Per Diem	0	0	50	S0		0
Personal Emergency Response System (PERS)		S5160		Encounter	0		S0	S0_		
Personal Emergency Response System (PERS)		S5161		Month		0	S0	S0	S0	0
Environmental Modification		S5165		Service	0	0	S0	\$0	S0	0
Enhanced Medical Equipment-Supplies		S5199			0	0	50	S0	S0	0
Occupational or Physical Therapy		S8990		Items	0	0	S0	\$0	S0	0
Health Services		S9445		Encounter	0	0	S0	\$0	<u>\$0</u>	0
Health Services				Encounter .	0	0	\$0	\$0	\$0	0
Health Services		S9446		Encounter	0	0	S0	\$0	S0	0_
		S9470		Encounter	21	21	\$2,465	S117	S117	1
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	60	8,152	\$99,723	\$1,662	\$12	136
Reidential Room and Board		S9976		Days	0	0	S0	S0	\$0	0
Assessment		T1001		Encounter	177	182	\$22,324	\$126	\$123	
Health Services	• • •	T1002		Up to 15 min	290	3,518	\$80,877	S279	S23	12
Respite Care		T1005		15 Minutes	27	38,820	\$91,035	\$3,372	\$2	1,438
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	S0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	24	561	\$46,912	\$1,955	S84	23
Targeted Case Management		T1017		15 minutes	1,134	39,024	\$1,946,106	\$1,716	\$50	34
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	38	1,022	\$66,514	\$1,750	\$65	27
Personal Care in Licensed Specialized Residential Setting		T1020		Days	31	8,981	\$82,342	\$2,656	\$9	290
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	8	2,220	\$122,050	\$15,256	\$55	278
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	5	1,112	\$73,580	\$14,716	\$66	222
Assessments		T1023		Encounter	673	894	\$660,344	\$981	\$739	1
Enhanced Medical Supplies or Pharmacy		T1999	,	Items	1	5	\$22	\$22	\$4	5
Transportation		T2001			0	0	\$0	\$0	S0	0
Transportation		T2002	,	Per Diem	0	0	\$0	\$0	S0	0
Transportation		T2003		Encounter / Trip	32	7,305	\$30,741	\$961	\$4	228
Transportation		T2004			1	250	\$257	\$257	S1	250
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0		\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	S0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0		\$0	\$0	0
Housing Assistance		T2038		Month	87	13	\$184,973	\$2,126	\$14,229	0
Enhanced Medical Equipment-Supplies		T2039		Items	1	1	\$3,996	\$3,996	\$3,996	1
Pharmacy (Drugs and Other Biologicals)		, 2003		100110	585	0	\$237,089	\$405	\$0	0
Other					0	0	\$237,089	\$0		0
Aggregate for 'J' Codes		ALL			22	0	\$1,774	\$81	\$0	
rigging are for 1 Cours		TLL					91,774	401		

CMHSP Cost Data by Service Category			Adults with M	Iental Illness		Fiscal Yea	r 2006-2007		f Michigan	
Bay-Arenac Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Total Population and Cost					3,297		\$11,157,212			

Berrien				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	20	2,707	\$874,361	\$43,718	\$323	135
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	3	23	\$15,417	\$5,139	\$670	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	136	1,576	\$920,858	\$6,771	\$584	12
Inpatient Hospital Ancillary Services - Room and Board	0144	-		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	SO	\$0	SO	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	S0	\$0	S0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	SO	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	SO	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912	78		Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942	_		# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	133	1,522	\$142,225	\$1,069	\$93	11
Assessment-Psychiatric Assessment		90801		Encounter	682	711	\$238,702	\$350	\$336	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0 .	\$0	\$0	\$0	00
Therapy-Individual Therapy .		90804		Encounter 20-30 Min	133	188	\$22,838	\$172	\$121	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	1,139	6,179	\$1,210,658	\$1,063	\$196	5

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Berrien Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	0910, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	50	\$0 \$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	22	94	\$26,619	\$1,210	\$283	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	SO	\$0	S0	. ,
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0		
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	S0	\$0	S0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	S0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	S0	SO	\$0	
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0		S0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	S0	S0	S0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	SO	\$0	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812	7	Encounter 45-50 Min	0	0	SO	SO	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	SO	SO	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	SO	So	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	SO	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	S0	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	S0	SO	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	I	1	\$70	\$70	\$70	1
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827 90828		Encounter 45-50 Min Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Therapy-Family Therapy		90846		Encounter	1	2	\$392	\$392	\$196	
Therapy-Family Therapy  Therapy-Family Therapy	*	90847		Encounter	16	51	\$9,933	\$621	\$195	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	,	90849		Encounter	0	0	\$0	\$0	S0	
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	
Therapy-Group Therapy	*****	90853		Encounter	25	286	\$47,069	\$1,883	\$165	11
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	SO	SO	0
Medication Review		90862		Encounter	1,664	6,517	\$913,623	\$549	\$140	4

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Berrien Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	· <u> </u>	90870		Encounter	0	0	\$0	\$0		
Assessments-Other		90887		Encounter	0	0		\$0	\$0 \$0	
Speech & Language Therapy		92506		Encounter	1	1	\$230	\$230	\$230	
Speech & Language Therapy		92507	-	Encounter	1	2	\$120	\$120	\$60	2
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$120	\$0	0
Speech & Language Therapy		92526		Encounter	- 0	0	\$0			0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0 S0	\$0	
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0			\$0	
Psychological Testing by Technician		96102		Per Hour	8	39	\$6,560	\$820	S168	
Psychological Testing by Comp		96103		Per Hour	0	0	S0	\$0		
Assessments-Other		96105		Encounter	0	0	S0			
Assessments-Other	·	96110		Encounter	0	0			S0	
Assessments-Other		96111		Encounter	0	0	\$0			0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	SO	S0		
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	S0	S0	
Neuropsych test by Tech		96119		Per Hour	0	0		\$0 S0	S0	
Neuropsych test Admin w/Comp		96120		Per Hour	0	0		S0		
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	SO	S0		0
Occupational Therapy		97003		Encounter	1	1	\$120	\$120	\$120	
Occupational Therapy		97004		Encounter	0	0	So	S0	\$0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	\$0	S0	
Occupational or Physical Therapy		97112		15 Minutes	0	0	S0			0
Occupational or Physical Therapy	•	97113	,	15 Minutes	0	0	\$0	\$0		0
Occupational or Physical Therapy		97116		15 Minutes	0	0			S0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0			0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	SO SO	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	SO	\$0	SO SO	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	S0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	SO	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	21	21	\$1,177	\$56	\$56	1
Additional Codes-Physician Services		99212		Encounter	5	5	\$327	\$65	\$65	<u>·</u>
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0
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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	181	230	\$64,498	\$356	\$280	1
Additional Codes-Physician Services		99215		Encounter	1	1	\$421	\$421	\$421	1
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			153	177	\$18,585	\$121	\$105	1
Additional Codes-Physician Services		99223			3	3	\$467	\$156	\$156	i
Additional Codes-Physician Services		99231			213	1,601	\$73,564	\$345	\$46	8
Additional Codes-Physician Services		99232			7	9	\$450	\$64	\$50	1
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	179	205	\$10,526	\$59	\$51	1
Additional Codes-Physician Services		99241		Encounter	0	0	SO	\$0	\$0	
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	SO	SO	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0		0
Additional Codes-Physician Services		99245		Encounter	0	0	S0	so	S0	
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0		0
Additional Codes-Physician Services		99252		Encounter	6	6	\$841	\$140	\$140	1
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services		99254		Encounter	0	0	SO	\$0		0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services		99261		Encounter	0	0	S0	SO SO	\$0	
Additional Codes-Physician Services		99262		Encounter	0	0	SO		\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	50	
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	50	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0		0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	SO SO	0
Medication Administration		99506		Encounter	0	0	SO	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation	and here	A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	•	A0110		Per one-way trip	73	1,453	\$50,127	\$687	\$34	20
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130	2,,,,,,		0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation	<del>-</del>	A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170		<u> </u>	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	***	A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings	_	D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
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Berrien				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	\$0	SO	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920	-		0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	
Assessment		H0002		Encounter	1	1	\$75	\$75	\$75	1
Substance Abuse: Individual Assessment		H0002		Encounter	0	- ,	\$0	\$13 \$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0 \$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	SO	SO	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	S0	
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0		S0	S0 S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0		\$0 \$0	S0 S0	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0 \$0		\$0	-
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0 \$0	\$0 \$0	0
Crisis Residential Services		H0018		Days	26	I19	\$29,750	\$1,144	\$250	5
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	S0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	SO		So	
Substance Abuse: Methadone		H0020		Encounter	0	0	SO	SO	SO SO	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	S0	SO		- 0
Peer Directed and Operated Support Services	-	H0023		Encounter	0	0	\$0	so	SO	
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	1,294	1,334	\$497,881	\$385	\$373	<u>i</u>
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032	•	Encounter	10	11	\$3,464	\$346	\$315	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	S0	0
Health Services		H0034		15 Minutes	0	0	\$0		SO	0
Home Based Services		H0036		15 Minutes	4	259	\$24,203	\$6,051	S93	65
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	So	0
Peer Directed and Operated Support Services		H0038		15 minutes	25	501	\$14,045	\$562	\$28	20
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	-	15 Minutes	51	6,462	\$664,234	\$13,024	\$103	127
Community Living Supports in Independent living/own home		H0043		Per diem	2	99	\$25,468	\$12,734	\$257	50
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	7	15	\$1,878	\$268	\$125	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	19	91	\$3,985	\$210	\$44	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	25	90,548	\$204,017	\$8,161	\$2	3,622
Community Living Supports (15 Minutes)		H2015		15 Minutes	103	90,506	\$327,042	\$3,175	\$4	879
Community Living Supports (Daily)		H2016		Per Diem	11	2,212	\$596,425	\$54,220	\$270	201
Community Living Supports (Daily)		H2016	TF	Per Diem	3	297	\$12,476	\$4,159	\$42	99
Community Living Supports (Daily)		H2016	TG	Per Diem	48	9,506	\$1,160,930	\$24,186	\$122	198
Behavior Services		H2019	-	15 Minutes	0	0	\$0	\$0	SO	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	37	4,606	\$28,615	\$773	\$6	124
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0

Berrien				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	53	72,380	\$1,110,588	\$20,954	\$15	1,366
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	so	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064	-	Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		\$0215		Per Mile	0	0	\$0	SO	\$0	0
Family Training	• "	S5110		15 Minutes	0	0	SO	SO	\$0	0
Family Training		S5111		Encounter	0	0	\$0	\$0	SO	0
Foster Care		S5140		Days	0	0	S0	\$0	SO	
Foster Care		S5145		Days	1	14	\$3,156	\$3,156	\$225	14
Respite		S5150		15 Minutes	0	0	SO	\$0	\$0	0
Respite		S5151		Per Diem	0	0	S0		S0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	S0	\$0		0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	SO		
Environmental Modification		S5165		Service	0	0	SO	\$0		0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	S0	\$0	\$0	
Occupational or Physical Therapy		S8990		Encounter	0	0	S0	\$0	S0	<u></u>
Health Services		S9445		Encounter	0	0	50	\$0	SO	0
Health Services		S9446		Encounter	0	0	SO	\$0	\$0	0
Health Services		S9470		Encounter	0	0	\$0	\$0	SO	0
Intensive Crisis Stabilization-Enrolled Program		S9484	_	Hour	0	0	\$0	\$0	SO	0
Reidential Room and Board		\$9976		Days	0	0	\$0	\$0	S0	0
Assessment		T1001		Encounter	3	3	\$841	\$280	\$280	
Health Services		T1002		Up to 15 min	20	88	\$4,794	\$240	\$54	4
Respite Care		T1005		15 Minutes	1	576	\$2,151	\$2,151	S4	576
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	
Respite Care	<u> </u>	T1005	TE	15 Minutes	0	0		\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	SO	\$0	0
Family Psycho-Education		T1015		Encounter	1	15	\$841	\$841	\$56	15
Supports Coordination/Wrap Facilitation		T1016		15 minutes	76	2,273	\$254,336	\$3,347	\$112	30
Targeted Case Management		T1017		15 minutes	372	7,866	\$808,655	\$2,174	\$103	21
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	3	29	\$1,402	\$467	S48	10
Personal Care in Licensed Specialized Residential Setting		T1020		Days	57	11,419	\$126,843	\$2,225	\$11	200
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	3	272	\$10,665	\$3,555	\$39	91
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	2	275	\$33,232	\$16,616	\$121	138
Assessments		T1023		Encounter	491	659	\$184,836	\$376	\$280	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation	-	T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	1	1	\$100	\$100	\$100	1
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	So	0
Enhanced Medical Equipment-Supplies		T2029		ltems	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	1	1	\$800	\$800	\$800	1
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			143	0	\$223,476	\$1,563	\$0	0
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CMHSP Cost Data by Service Categor	у		Adults with M	lental Illness		Fiscal Ye		State of Michigan		
Berrien Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Total Population and Cost					2,878		\$11,011,981			

CMHSP Cost Data by Service Category			Adults with N	Mental Illness		Fiscal Yea	ır 2006-2007		State of	Michigan
Clinton Eaton Ingham				Unit						=
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	90	8,575	\$2,878,052	\$31,978	\$336	95
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	29	372	\$159,111	\$5,487	\$428	13
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	592	7,520	\$3,079,367	\$5,202	\$409	13
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		·	Days	0	0		SO SO	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	SO	S0	S0	
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	SO	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	SO	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0		\$0	S0	0
ECT Anesthesia	0370				0	0	So	SO	<u>so</u>	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	SO	\$0	SO SO	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	SO	S0		0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	SO	50	
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0		\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	SO	SO	\$0	
Inpatient Hospital Ancillary Services - Audiology	0470-0472	****		# of tests	0	0	\$0	SO	SO	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	SO	\$0	SO	0
ECT Recovery Room	0710				0	0	\$0	SO	SO	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	SO	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	So	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	1	11	\$4,514	\$4,514	\$410	11
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	317	5,194	\$370,329	\$1,168	\$71	16
Assessment-Psychiatric Assessment		90801		Encounter	1,504	2,144	\$886,172	\$589	\$413	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	12	12	\$6,568	\$547	\$547	1
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	312	749	\$82,974	\$266	\$111	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	S0	\$0	0

Therapy-Individual Therapy

Therapy-Individual Therapy

Substance Abuse: Outpatient Treatment

Michigan Department of Community Health

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Encounter 20-30 Min

Encounter 20-30 Min

Encounter 45-50 Min

10

0

2,695

\$1,108

\$547,456

\$0

\$123

\$954

\$0

\$111

\$203

\$0

0

5

9

0

574

90805

90805

90806

0900, 0914, 0915, 0916, 0919

# CMHSP Cost Data by Service Category

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Clinton Eaton Ingham Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	0916, 0919	90807		Encounter 45-50 Min	0	0	\$0			
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0 \$0	\$0 \$0	0
Therapy-Individual Therapy	0910, 0919	90808		Encounter 75-80 Min	42	85	\$25,111	\$598	\$295	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	1	1	\$295	\$295	\$295	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0		\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	S0	\$0	S0	
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0		\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	S0		S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	SO	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	SO	\$0	So	. 0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	So	SO	SO	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	S0	\$0	SO	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	S0	\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	S0	S0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	11	15	\$1,662	\$151	\$111	
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	9	10	\$1,846	\$205	\$185	1
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	S0	S0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	2	3	\$880	\$440	\$293	2
Therapy-Family Therapy		90847		Encounter	18	63	\$12,168	\$676	\$193	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	59	538	\$76,873	\$1,303	\$143	9
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	S0	0
Therapy-Group Therapy		90857		Encounter	16	76	\$6,140	\$384	\$81	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	SO	0
Medication Review		90862		Encounter	1,965	9,660	\$1,691,666	\$861	\$175	5

CN-4 F-4 I1						r isour rour	2000 2007		State of	Michigan
Clinton Eaton Ingham Service Category	Revenue Code H	CPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915,	90862		Encounter	0	0		\$0	\$0	0
Additional Codes-ECT Physician	0916, 0919	90870		Encounter	0	0	\$0	\$0		
Assessments-Other		90887		Encounter	13	21			\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$7,103	\$546	\$338	2
Speech & Language Therapy		92507		Encounter	0		\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0 0	\$0	\$0	\$0	
Speech & Language Therapy		92526		Encounter	0	0	S0	\$0	S0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	<u>\$0</u>	. 0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0		\$0	\$0	S0	0
Psychological Testing by Technician		96102		Per Hour	0	0	S0	SO SO	\$0	0
Psychological Testing by Comp		96103		Per Hour	0		\$0	\$0	S0	0
Assessments-Other		96105		Encounter	0	0		\$0	<u>\$0</u>	0
Assessments-Other		96110		Encounter		0	S0	\$0	S0	
Assessments-Other	·	96111			0	0	50	\$0	S0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Encounter	0	0	S0	\$0	S0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	S0	S0		0
Neuropsych test by Tech				Per Hour	0	0	S0_	\$0	S0	0
Neuropsych test Admin w/Comp		96119		Per Hour	0	0	S0	\$0	S0	0
Physical Therapy		96120		Per Hour	0	0	50	S0	So	0
Physical Therapy		97001		Encounter	0	0	S0		S0	0
		97002		Encounter	0	0	S0	S0	\$0	0
Occupational Therapy		97003		Encounter	0	0	\$0	50	S0	0
Occupational Therapy		97004		Encounter	0	0	S0	\$0	S0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	S0	S0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0		\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	. 0	\$0	<u>\$0</u>	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0		\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0		SO	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	So	\$0	S0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	80	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0		\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	3	3	\$119	\$40	\$40	1
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	S0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	00	\$0	\$0	\$0	0
Occupational Therapy	1.410.400.41	97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services		99201		Encounter	0	0	SO	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	SO	\$0	So	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	SO	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	SO	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	50	SO	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	SO	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	S0	\$0	\$0	0
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Clinton Eaton Ingham				***						
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	S0	
Additional Codes-Physician Services		99221			0	0	\$0 \$0	\$0 \$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0			0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0 \$0	0
Additional Codes-Physician Services		99231			0	0	S0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	SO	\$0 \$0	S0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	S0	S0	S0	
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	S0	S0	
Additional Codes-Physician Services		99242		Encounter	0	0	S0		S0	
Additional Codes-Physician Services		99243		Encounter	0	0	\$0 \$0		S0	
Additional Codes-Physician Services		99244		Encounter	0	0	S0	S0		
Additional Codes-Physician Services		99245		Encounter	0	0	S0		S0	0
Additional Codes-Physician Services		99251		Encounter	0	0	S0		S0	
Additional Codes-Physician Services		99252		Encounter	0	0	S0		S0	0
Additional Codes-Physician Services		99253		Encounter	0	0		\$0	S0	
Additional Codes-Physician Services		99254	***	Encounter	0	0	S0	S0	S0	0
Additional Codes-Physician Services		99255		Encounter	0	0	S0		S0	0
Additional Codes-Physician Services		99261	*****	Encounter	0	0			S0	
Additional Codes-Physician Services		99262		Encounter	0	0		S0	S0	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0		S0	0
Additional Codes-Physician Services		99271		Encounter	0	0	\$0			0
Additional Codes-Physician Services		99272		Encounter	0	0	S0	\$0	\$0 \$0	
Additional Codes-Physician Services	······································	99273		Encounter	0	0	\$0	SO	<u>so</u>	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	S0		
Additional Codes-Physician Services		99275	•	Encounter	0	0	\$0	\$0	\$0	
Medication Administration		99506		Encounter	3	10	\$882	S294	S88	3
Transportation		A0080		Per mile	0	0	\$0	\$0	SO	
Transportation		A0090		Per mile	0	0	\$0	\$0	SO	
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	S0	\$0	S0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	SO	SO	0
Transportation		A0140			0	0	\$0	S0	S0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	76	2,842	\$12,569	\$165	\$4	37
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			79	116	\$21,022	\$266	\$181	1
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	S0	\$0	SO	0
Intraoral periapical		D0220			0	0	\$0	\$0	S0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	SO	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

#### **CMHSP Cost Data by Service Category**

Clinton Potent Landson						110001 100	. 2000 2007			
Clinton Eaton Ingham Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	 \$0		
Peridontal, main		D4910			0	0	20	\$0	\$0 \$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0		
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0		\$0	\$0		
Behavior Management/dental, by report		D9920			0		\$0	\$0	\$0 \$0	0
Enhanced Medical Equipment-Supplies	***************************************	E1399		Items	0	0		\$0 \$0	\$0	
Family Training/Support EBP only		G0177		Encounter	0	0	S0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0 \$0		0
Assessment		H0002		Encounter	0	0	S0	\$0 \$0	SO SO	
Substance Abuse: Individual Assessment		H0002		Encounter	0		S0			
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	2	15	\$2,143	\$1,072	S143	8
Substance Abuse: Case Management		H0006			0	0			S0	
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0 \$0	S0	<u></u>	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0				S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0		\$0 \$0		50	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	S0	S0	\$0	0
Crisis Residential Services		H0018		Days	385	4,357	\$1,232,020	\$3,200	S283	11
Substance Abuse: Residential	1002	H0018		Days	0	0	\$1,232,020	\$0	\$0 S0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	S0	
Substance Abuse: Methadone	· · · · · · · · · · · · · · · · · · ·	H0020		Encounter	0	0		SO		
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0			0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	S0		S0	
Prevention Services - Direct Model		H0025		Face to Face Contact	7	17	\$5,977	S854	\$352	
Assessment		H0031		Encounter	855	908	\$363,527	\$425	\$400	
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	
Treatment Planning		H0032		Encounter	282	326	\$82,015	\$291	\$252	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	
Health Services		H0034		15 Minutes	181	1,686	\$264,510	\$1,461	\$157	9
Home Based Services		H0036		15 Minutes	114	6,251	\$389,554	\$3,417	\$62	55
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038	<del></del>	15 minutes	4	133	\$8,017	\$2,004	\$60	33
Peer Directed and Operated Support Services		NA			0	0	\$0	S0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	78	6,725	\$754,518	\$9,673	\$112	86
Community Living Supports in Independent living/own home	<u> </u>	H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0		\$0	\$0	0
Behavior Management Review	<del></del>	H2000		Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	1,616	9,967	\$1,019,208	\$631	\$102	6
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	44	2,000	\$7,297	\$166	\$4	45
Community Living Supports (15 Minutes)		H2015		15 Minutes	484	84,868	\$330,241	\$682	\$4	175
Community Living Supports (13 Minutes)  Community Living Supports (Daily)		H2015		Per Diem	45	12,244	\$323,307	\$7,185	\$26	272
Community Living Supports (Daily)		H2016	TF	Per Diem	28	8,091	\$481,741	\$17,205	\$60	289
Community Living Supports (Daily)  Community Living Supports (Daily)		H2016	TG	Per Diem	74	20,533	\$2,838,124	\$38,353	\$138	277
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0,555 \$0		0
Wraparound		H2019		15 Minutes	3	33	\$3,362	\$1,121	\$102	11
Wraparound		H2021		Days		0	\$3,302	\$0	\$0	
		H2022		15 minutes	81	6,913	\$350,135	\$4,323	\$51	85
Supported Employment Services  Mental Health Therapy		H2023		15 Minutes	0	0,913	\$330,133	\$4,323 \$0		0
мена псані тветару		H2027		12 IATHIGIES	υ	<u>_</u>				

#### CMHSP Cost Data by Service Category

Clinton Eaton Ingham				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	136	87,407	\$595,196	\$4,376	<b>\$</b> 7	643
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	143	763	\$93,090	\$651	\$122	5
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	12	16	\$996	\$83	\$62	1
Foster Care		S5140		Days	28	8,530	\$193,431	\$6,908	S23	305
Foster Care		S5145		Days	2	3	\$963	\$482	\$321	
Respite		S5150		15 Minutes	0	0	\$0	\$0	\$0	0
Respite		S5151		Per Diem	0	0	\$0	S0	\$0	
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	S0		
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	S0	SO	
Environmental Modification		S5165		Service	0	0	S0	\$0	SO	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0		S0	SO SO	
Occupational or Physical Therapy	10.00	S8990		Encounter	0	0	\$0		SO	
Health Services		S9445		Encounter	331	1,229	\$118,655	\$358	\$97	4
Health Services		S9446	-	Encounter	1	1	\$75	\$75	\$75	1
Health Services		S9470		Encounter	0	0	S0	S0	SO	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	342	453	\$405,829	S1,187	\$896	1
Reidential Room and Board		S9976		Days	385	4,357	\$155,467	\$404	\$36	11
Assessment		T1001		Encounter	177	224	\$33,823	\$191	\$151	1
Health Services		T1002		Up to 15 min	771	2,462	\$136,793	\$177	\$56	3
Respite Care		T1005	-	15 Minutes	10	576	\$1,402	\$140	\$2	58
Respite Care		T1005	TD	15 Minutes	0	0	SO	S0	S0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	S0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	SO	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	5	6	\$438	\$88	\$73	I
Targeted Case Management		T1017		15 minutes	1,360	45,055	\$3,184,686	\$2,342	\$71	33
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	106	2,919	\$213,419	\$2,013	\$73	28
Personal Care in Licensed Specialized Residential Setting		T1020		Days	139	39,593	\$383,050	\$2,756	\$10	285
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	4	1,276	\$75,532	\$18,883	\$59	319
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	52	60	\$8,378	\$161	\$140	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005		·	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	So	0
Aggregate for 'J' Codes		ALL			0	0	\$264,641	S0	\$0	0
						-	-			

CMHSP Cost Data by Service Category			Adults with M	ental Illness		Fiscal Yea	ır 2006-2007		State of Michigan		
Clinton Eaton Ingham Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
Total Population and Cost					4.411		\$24,195,547				

CMH for Central Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	21	2,648	\$1,016,620	\$48,410	\$384	126
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	13	114	\$75,233	\$5,787	\$660	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	339	1,961	\$1,294,143	\$3,818	\$660	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		•	Days	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	S0	S0	S0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	S0	\$0	\$0	0
ECT Anesthesia	0370				0	0	SO	\$0		
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	S0	So	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	SO	S0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	S0	\$0	S0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	S0	So	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	S0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	SO	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	2	5	\$1,232	\$616	\$246	3
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	163	2,458	\$97,559	\$599	\$40	15
Assessment-Psychiatric Assessment		90801		Encounter	2,262	2,739	\$437,199	\$193	\$160	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	SO	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	S0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	679	1,232	\$115,845	\$171	\$94	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	24	47	\$1,830	\$76	\$39	2
Therapy-Individual Therapy		90805		Encounter 20-30 Min	287	650	\$123,929	\$432	\$191	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	2,858	18,718	\$1,760,053	\$616	\$94	7

#### Adults with Mental Illness

Fiscal Year 2006-2007

State of Michigan

CMH for Central Michigan				** *						<i>6</i>
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	276	915	\$66,526	\$241	\$73	3
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	SO	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	207	297	\$27,927	\$135	\$94	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810	_	Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	S0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	S0	SO	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	S0	\$0	SO	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	S0	\$0	SO.	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	SO	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	S0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	SO	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	6	10	\$448	\$75	\$45	2
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min Encounter 45-50 Min	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	-	90829		Encounter 75-80 Min	0	0	\$0	\$0		0
Therapy-Family Therapy		90846		Encounter	10	19	\$1,752	\$175	\$92	2
Therapy-Family Therapy	,	90847		Encounter	73	162	\$14,942	\$205	\$92	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847	-	Encounter	4	4	\$530	\$133	\$133	1
Therapy-Family Therapy		90849	****	Encounter	0	0	so	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	186	1,400	\$80,515	\$433	\$58	8
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	220	1,715	\$62,995	\$286	\$37	8
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	2,215	8,077	\$990,725	\$447	\$123	4

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CMH for Central Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887	•	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	so	S0	0
Speech & Language Therapy		92610		Encounter	0	0	SO	\$0	S0	- 0
Psychological Testing PSYCH/PHYS		96101		Per Hour	45	269	\$45,337	\$1,007	S169	
Psychological Testing by Technician		96102		Per Hour	17	172	\$28,989	\$1,705	\$169	10
Psychological Testing by Comp		96103		Per Hour	0	0	SO	S0	SO SO	0
Assessments-Other		96105		Encounter	0	0	SO	S0	S0	
Assessments-Other		96110		Encounter	0	0	S0	SO SO	S0	0
Assessments-Other		96111		Encounter	1	ı	\$900	\$900	\$900	
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0		\$0	
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	SO	S0	SO	0
Neuropsych test by Tech		96119		Per Hour	0	0		S0	SO	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	S0	0
Physical Therapy		97001		Encounter	0	0	50	\$0		0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	SO	0
Occupational Therapy		97003		Encounter	18	18	\$3,138	\$174	\$174	1
Occupational Therapy		97004		Encounter	13	13	\$2,091	\$161	\$161	1
Occupational or Physical Therapy		97110		15 Minutes	9	37	\$1,014	\$113	S27	4
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	S0	

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Occupational or Physical Therapy

Occupational Therapy

Occupational Therapy

Occupational Therapy

Occupational Therapy

Health Services

C/O for Orthotic/Prosth Use

Assessment or Health Services

Assessment or Health Services

Additional Codes-Physician Services

CMH for Central Michigan				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			22	22	\$1,504	\$68	\$68	1
Additional Codes-Physician Services		99222			45	45	\$5,080	\$113	\$113	1
Additional Codes-Physician Services		99223			148	160	\$24,979	\$169	\$156	1
Additional Codes-Physician Services		99231			33	81	\$2,667	\$81	\$33	2
Additional Codes-Physician Services	1	99232			148	480	\$26,169	\$177	\$55	3
Additional Codes-Physician Services		99233			134	313	\$23,637	\$176	\$76	
Additional Codes-Physician Services		99238		30 Minutes or less	2	2	\$130	\$65	\$65	
Additional Codes-Physician Services	~~~	99241		Encounter	0	0	SO	. S0	50	
Additional Codes-Physician Services		99242		Encounter	0	0	SO	\$0		0
Additional Codes-Physician Services		99243		Encounter	0	0	SO	\$0		0
Additional Codes-Physician Services		99244		Encounter	0	0	S0	S0	SO	0
Additional Codes-Physician Services		99245		Encounter	0	0	SO	S0	S0	0
Additional Codes-Physician Services		99251		Encounter	0	0	S0	\$0	SO -	
Additional Codes-Physician Services		99252		Encounter	32	37	\$3,247	\$101	S88	I
Additional Codes-Physician Services		99253		Encounter	15	15	\$1,488	\$99	S99	
Additional Codes-Physician Services		99254		Encounter	11	11	\$1,562	\$142	S142	1
Additional Codes-Physician Services		99255		Encounter	1	1	\$106	\$106	\$106	1
Additional Codes-Physician Services		99261		Encounter	0	0	S0	SO	S0	0
Additional Codes-Physician Services		99262		Encounter	0	0	SO	So	SO SO	0
Additional Codes-Physician Services		99263		Encounter	0	0	SO	SO	SO	0
Additional Codes-Physician Services		99271		Encounter	0	0	S0	SO	So	0
Additional Codes-Physician Services		99272		Encounter	0	0	S0	So So		0
Additional Codes-Physician Services		99273	_	Encounter	0	0	S0	\$0	so	
Additional Codes-Physician Services		99274	, ,	Encounter	0	0	S0			0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	S0	0
Medication Administration		99506		Encounter	8	51	\$2,100	\$263	\$41	6
Transportation		A0080		Per mile	0	0	\$0		\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	SO SO	0
Transportation		A0100		Per one-way trip	0	0	SO SO	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230	-		0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	SO	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	S0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0		\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0		\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	SO		\$0	0
Resin based comp-three surfaces, post		D2393			0	0	S0	\$0		0
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## CMHSP Cost Data by Service Category

Process   Proc	, · · · · · · · · · · · · · · · · · · ·						riscal i ca	11 2000-2007		State of	witchigan
Comment   March   Ma	CMH for Central Michigan Service Category	Revenue Code	HCPCS Code	Modifier		Cocas	Unite	Cont	Cost/Cose	Cost/Unit	Unit/Cone
Personal mane					Wicasurc						Onit/Case
Segret means of expected many   1971   1972   197											
About 1999   1	· · · · · · · · · · · · · · · · · · ·										
Public Note Number New Principal   1996   19   19   19   19   19   19											
Define Marche Spright Show   1935											
Part			<del></del>		Ye	· -					
Selection   1,000								_			
Messenses   10002   Possenger   12   13   15   15   15   15   15   15   15	The state of the s					<del></del>					
Solutine Above: Delivided Above: Deliv	The state of the s										
Saltetine Abbite Confighent Teatment   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915, 18100   \$800, 0914, 0915		****									
Section   Physical Process   P		0900 0914 0915	·								
Substance Abane Such Annue Such		0916, 0919				,	0	\$0	S0	\$0 	0
Substance Abase Sub-Auser Descriptation   1002   10104   1004   1005   1007	Substance Abuse: Outpatient Treatment		H0005		Encounter	0	0	\$0	\$0	\$0	0
Substance Aboute Sub-Acute Pountification   1002   10101   1002   1004   1005   100   1005	Substance Abuse: Case Management		H0006			0	0	S0	S0		
Selbstein Aleus Sub-Acuse Deconfication   100	Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0			-	
Substance Abase: Sub-Annexe Desconfication   1000   1001	Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	69	155	\$62,033	S899		
Selection	Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0				
Substance Abuse: Residential   1002   18018   1003   19018   1003   19018   1003   19018   1003   19018   1003   19018   1003   19018   1003   19018   1003   19018   1003   19018	Substance Abuse: Outpatient Care		H0015		Days	29	215				
Substance Abuse Residential   1002   10019   10049	Crisis Residential Services		H0018		Days	0	0	SO	SO	50	0
Substance Abuse: Residential   1002   10019	Substance Abuse: Residential	1002	H0018								
Substance Abuse Methadone   100000   100000   100000   100000   100000   100000   100000   1000000   100000000	Substance Abuse: Residential	1002	H0019	• •							
Substance Abuse: Early Intervention   H0022   Encounter   0   0   So   50   50   0   0   0   0   0   0   0	Substance Abuse: Methadone		H0020								
Per Directed and Operated Support Services   H0025   Pacto face Contains   R5   R5   R5   R5   R5   R5   R5   R	Substance Abuse: Early Intervention		H0022		Encounter						
Prevention Services - Direct Model   H0025   Face to Face Contact   85   138   518.75   5222   5175   22   23   23   23   23   23   23   2			H0023	74	Encounter	0		·			
Assentem         H0031         Encounter         404         452         \$143,474         \$355         \$317         \$10           Substance Abuse: Pharmalogies         H0031         Encounter         0         0         \$50         \$	Prevention Services - Direct Model		H0025		Face to Face Contact	85	138				
Substance Abuse: Assessment   H0031	Assessment		H0031								
Parameter Planning	Substance Abuse: Assessment		H0031		Encounter	0	0				
Substance Abuse: Pammalogical Support - Suboxane   H003											
Health Services	Substance Abuse: Pharmalogical Support - Suboxane	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	H0033		Encounter						
Home Based Services			H0034		15 Minutes		354				
Community Psychiatric Supportive Treatment         H0037         Per diem         0         0         \$0											
Peer Directed and Operated Support Services   10	Community Psychiatric Supportive Treatment		H0037		Per diem	0	0				
Peer Directed and Operated Support Services         NA         0         0         50         50         50         30           Assertive Community Irvantment (ACT)         H0039         15 Minutes         66         6,404         \$404,861         \$6,134         \$63         97           Community Living Supports in Independent living/own home         H0045         Per Diem         32         2,83         \$20,323         \$6,351         \$70         90           Respite         H0045         Per Diem         0         0         \$			H0038		15 minutes	9	441	\$1,601	\$178		
Community Living Supports in Independent living/own home         H0043         Per diem         32         2,883         \$203,223         \$6,351         \$70         99           Respite         H0045         Per Diem         0         0         \$0			NA			0	0				
Respite         H0045         Per Diem         0         0         \$0	Assertive Community Treatment (ACT)		H0039		15 Minutes	66	6,404	\$404,861	\$6,134	\$63	97
Substance Abuse: Individual Assessment         H0049         Encounter         0         0         \$0 <th< td=""><td>Community Living Supports in Independent living/own home</td><td></td><td>H0043</td><td></td><td>Per diem</td><td>32</td><td>2,883</td><td>\$203,223</td><td>\$6,351</td><td>\$70</td><td>90</td></th<>	Community Living Supports in Independent living/own home		H0043		Per diem	32	2,883	\$203,223	\$6,351	\$70	90
Behavior Management Review         H2000         Encounter         0         0         \$0	Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only         H2010         15 minutes         0         0         \$0	Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H2011         15 Minutes         599         2,673         \$596,079         \$995         \$223         4           Skill-Building and Out of Home Non Vocational Habilitation         H2014         15 minutes         605         430,203         \$933,541         \$1,543         \$2         711           Community Living Supports (15 Minutes)         H2015         15 Minutes         522         1,493,792         \$4,884,699         \$9,358         \$3         2,862           Community Living Supports (Daily)         H2016         TF         Per Diem         35         8,351         \$148,063         \$4,230         \$18         239           Community Living Supports (Daily)         H2016         TF         Per Diem         47         12,154         \$575,856         \$12,252         \$47         259           Community Living Supports (Daily)         H2016         TG         Per Diem         118         30,834         \$3,467,591         \$29,386         \$112         261           Behavior Services         H2019         15 Minutes         0         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0 <t< td=""><td>Behavior Management Review</td><td>-</td><td>H2000</td><td></td><td>Encounter</td><td>0</td><td>0</td><td>\$0</td><td>\$0</td><td>\$0</td><td>0</td></t<>	Behavior Management Review	-	H2000		Encounter	0	0	\$0	\$0	\$0	0
Crisis Intervention         H2011         15 Minutes         599         2,673         \$596,079         \$995         \$223         4           Skill-Building and Out of Home Non Vocational Habilitation         H2014         15 minutes         605         430,203         \$933,541         \$1,543         \$2         711           Community Living Supports (15 Minutes)         H2015         15 Minutes         522         1,493,792         \$4,884,699         \$9,358         \$3         2,862           Community Living Supports (Daily)         H2016         TF         Per Diem         35         8,351         \$148,063         \$4,230         \$18         239           Community Living Supports (Daily)         H2016         TF         Per Diem         47         12,154         \$575,856         \$12,252         \$47         259           Community Living Supports (Daily)         H2016         TG         Per Diem         118         30,834         \$3,467,591         \$29,386         \$112         261           Behavior Services         H2019         15 Minutes         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         <	Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)         H2015         15 Minutes         522         1,493,792         \$4,884,699         \$9,358         \$3         2,862           Community Living Supports (Daily)         H2016         Per Diem         35         8,351         \$148,063         \$4,230         \$18         239           Community Living Supports (Daily)         H2016         TF         Per Diem         47         12,154         \$575,856         \$12,252         \$47         259           Community Living Supports (Daily)         H2016         TG         Per Diem         118         30,834         \$3,467,591         \$29,386         \$112         261           Behavior Services         H2019         15 Minutes         0         0         \$0			H2011		15 Minutes	599	2,673	\$596,079	\$995	\$223	4
Community Living Supports (Daily)         H2016         Per Diem         35         8,351         \$148,063         \$4,230         \$18         239           Community Living Supports (Daily)         H2016         TF         Per Diem         47         12,154         \$575,856         \$12,252         \$47         259           Community Living Supports (Daily)         H2016         TG         Per Diem         118         30,834         \$3,467,591         \$29,386         \$112         261           Behavior Services         H2019         15 Minutes         0         0         \$0	Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	605	430,203	\$933,541	\$1,543	\$2	711
Community Living Supports (Daily)         H2016         Per Diem         35         8,351         \$148,063         \$4,230         \$18         239           Community Living Supports (Daily)         H2016         TF         Per Diem         47         12,154         \$575,856         \$12,252         \$47         259           Community Living Supports (Daily)         H2016         TG         Per Diem         118         30,834         \$3,467,591         \$29,386         \$112         261           Behavior Services         H2019         15 Minutes         0         0         \$0	Community Living Supports (15 Minutes)		H2015		15 Minutes	522	1,493,792	\$4,884,699	\$9,358	\$3	2,862
Community Living Supports (Daily)         H2016         TF         Per Diem         47         12,154         \$575,856         \$12,252         \$47         259           Community Living Supports (Daily)         H2016         TG         Per Diem         118         30,834         \$3,467,591         \$29,386         \$112         261           Behavior Services         H2019         15 Minutes         0         0         \$0<					Per Diem						
Community Living Supports (Daily)         H2016         TG         Per Diem         118         30,834         \$3,467,591         \$29,386         \$112         261           Behavior Services         H2019         15 Minutes         0         0         50         50         50         0         0           Wraparound         H2021         15 Minutes         2         16         \$1,136         \$568         \$71         8           Wraparound         H2022         Days         0         0         50         50         50         0           Supported Employment Services         H2023         15 minutes         101         167,354         \$413,365         \$4,093         \$2         1,657			H2016	TF	Per Diem	47	12,154			\$47	259
Behavior Services         H2019         15 Minutes         0         0         \$50         \$50         \$0         0           Wraparound         H2021         15 Minutes         2         16         \$1,136         \$568         \$71         8           Wraparound         H2022         Days         0         0         \$0 <td>WYLERA COLUMN TO A COLUMN TO A</td> <td></td> <td>H2016</td> <td>TG</td> <td>Per Diem</td> <td>118</td> <td>30,834</td> <td></td> <td></td> <td>\$112</td> <td></td>	WYLERA COLUMN TO A		H2016	TG	Per Diem	118	30,834			\$112	
Wraparound         H2021         15 Minutes         2         16         \$1,136         \$568         \$71         8           Wraparound         H2022         Days         0         0         50         50         50         0         0         0         50         \$0         50         50         50         0         0         50         \$413,365         \$4,993         \$2         1,657           Supported Employment Services         H2023         15 minutes         101         167,354         \$413,365         \$4,993         \$2         1,657				,	15 Minutes	0	0		S0		
Wraparound         H2022         Days         0         0         \$0					<del>-</del>		16				
Supported Employment Services         H2023         15 minutes         101         167,354         \$413,365         \$4,093         \$2         1,657						0				*****	
		<u> </u>				101	167,354				
	Mental Health Therapy		H2027								0

Fiscal Year 2006-2007

						1.500.	2000 2007			
CMH for Central Michigan Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030	-	15 Minutes	172	206,419	\$536,689			
Substance Abuse: Outpatient Care		H2035	· <del>-</del>	Hour	0	0	\$0	\$3,120 \$0	\$3 \$0	1,200
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	
Medication Review		M0064		Encounter Face-to-Face	625	1,000	\$122,600	\$196	\$123	2
Transportation		S0209		Per Mile	0	0	\$122,000	\$0	\$123	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0		\$0	\$0	
Family Training		S5111		Encounter	1	10	\$1,300	\$1,300	\$130	10
Foster Care		S5140		Days	- 0	0	\$0	\$0	\$130	0
Foster Care		S5145		Days	0	0	\$0	\$0	\$0 \$0	
Respite		S5150	***	15 Minutes	0	0	\$0	\$0	\$0	
Respite	****	\$5150		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	- 0	0		\$0		
Personal Emergency Response System (PERS)		S5161		Month	55	571			\$0	0
Environmental Modification		S5165		Service	2	2	\$72,643	\$1,321	\$127	10
Enhanced Medical Equipment-Supplies		S5199		Items		WY	\$1,334	\$667	\$667	
Occupational or Physical Therapy		S8990		Encounter	- 0	375	\$0	\$0	\$0_	0
Health Services		S9445					\$12,213	\$3,053	\$33	94
Health Services		S9445 S9446		Encounter	6	10	\$1,608	\$268	\$161	2
				Encounter	31	147	\$8,575	\$277	\$58	5
Health Services		S9470		Encounter	0	0	\$0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	8	1,340	\$10,747	\$1,343	\$8	168
Reidential Room and Board		S9976		Days	0	0	\$0	\$0	\$0	0
Assessment		T1001		Encounter	129	129	\$19,416	\$151	\$151	<u>I</u>
Health Services		T1002		Up to 15 min	1,590	4,714	\$181,631	\$114	\$39	3
Respite Care		T1005		15 Minutes	37	25,746	\$38,104	\$1,030	\$1	696
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	. 0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	23	43	\$3,966	\$172	\$92	2
Supports Coordination/Wrap Facilitation		T1016		15 minutes	487	23,662	\$1,678,346	\$3,446	\$71	49
Targeted Case Management		T1017		15 minutes	1,080	46,010	\$3,263,489	\$3,022	\$71	43
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	125	27,360	\$440,497	\$3,524	\$16	219
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	44	11,749	\$539,397	\$12,259	\$46	267
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	127	12,686	\$1,299,427	\$10,232	\$102	100
Assessments		T1023		Encounter	518	1,042	\$167,543	\$323	\$161	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	53	66	\$9,422	\$178	\$143	1
Transportation		T2001			0	00	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	390	26,489	\$36,555	\$94	\$1	68
Transportation		T2003		Encounter / Trip	79	978	\$12,558	\$159	\$13	12
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	26	256	\$25,600	\$985	\$100	10
Enhanced Medical Equipment-Supplies		T2028		Items	3	11	\$1,110	\$370	\$101	4
Enhanced Medical Equipment-Supplies		T2029		Items	16	26	\$14,658	\$916	\$564	2
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	2	22	\$4,070	\$2,035	\$185	11
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	68	202	\$71,156	\$1,046	\$352	3
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					2	0	\$92	\$46	\$0	0
Aggregate for 'J' Codes		ALL			163	0	\$477,056	\$2,927	\$0	0
								25,70.		

CMHSP Cost Data by Service Category			Adults with M	Iental Illness		Fiscal Yea	r 2006-2007	State of Michigan			
CMH for Central Michigan Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
Total Population and Cost				778 2.00	5,142		\$27,952,061				

0916, 0919

0916, 0919

0900, 0914, 0915,

90805

90805

90806

Substance Abuse: Outpatient Treatment

Substance Abuse: Outpatient Treatment

Therapy-Individual Therapy

Therapy-Individual Therapy

05/31/2008 Page 2c2- 50 Michigan Department of Community Health

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 45-50 Min

0

251

0

0

1,579

\$0

\$0

\$282,387

\$0

\$0

\$1,125

SO

\$0

\$0

\$179

0

## CMHSP Cost Data by Service Category

-			riddits with	Wientai finiess		riscai yea	r 2006-2007		State of	Michigan
Copper Country Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units		0. 1/0	0 .71	** ***
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	90806					Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse. Outpanent Treatment	0916, 0919	90806		Encounter 45-50 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	10	53	\$15,118	\$1,512	\$285	- 5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	So	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	S0	SO	so	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	S0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	SO	\$0	
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	S0		SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	50	\$0	S0	- 0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	S0	S0	SO	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	S0	\$0 \$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	SO	- 0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	SO	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	S0	So	50	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	S0	\$0	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)	· · · · · · · · · · · · · · · · · · ·	90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827 90828		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	
Therapy-Family Therapy Therapy-Family Therapy		90846		Encounter Encounter	9	11	\$3,666	\$407	\$333	1
Therapy-Family Therapy Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	79	\$28,278 \$0	\$912 \$0	\$358 \$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	26	231	\$44,663	\$1,718	\$193	9
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	310	1,652	\$333,656	\$1,076	\$202	5

Copper Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	SO	\$0	\$0	0
Additional Codes-ECT Physician		90870	-	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	S0	\$0	S0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	1	3	\$611	\$611	\$204	3
Psychological Testing by Technician		96102		Per Hour	0	0	S0	\$0	\$204 \$0	0
Psychological Testing by Comp		96103		Per Hour	0	0	S0	S0		0
Assessments-Other		96105		Encounter	0	0			S0	
Assessments-Other		96110		Encounter	0	- 0				
Assessments-Other		96111		Encounter	0	0	\$0 S0	\$0	S0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0		\$0 \$0	S0	
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0 \$0	\$0		0
Neuropsych test by Tech		96119		Per Hour	0	0				0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0 \$0	\$0		0
Physical Therapy		97001		Encounter	0	0	\$0 \$0		S0	0
Physical Therapy		97002		Encounter	0			80	S0	0
Occupational Therapy		97003		Encounter	1	1	\$0	S0	\$0	0
Occupational Therapy		97004		Encounter	2		\$2,448	\$2,448	S2,448	1_
Occupational or Physical Therapy	~	97110		15 Minutes	0		\$1,538	S769	\$769	1
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	50	50	0
Occupational or Physical Therapy	_	97113		15 Minutes	0	0		S0	S0	0
Occupational or Physical Therapy		97116		15 Minutes	0			S0	S0	0
Occupational or Physical Therapy	<del>-</del>	97116		15 Minutes	0	0	S0	\$0	50	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	S0	S0	0
Occupational of Physical Therapy		97150		Encounter	17		\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	270	\$47,568	\$2,798	\$176	16
	_	97532			21	·	\$0	\$0	- \$0	0
Occupational or Physical Therapy				15 Minutes		337	\$28,410	\$1,353	\$84	16
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	80	S0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	- Area -	97542 97703		15 Minutes 15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy					0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	SO	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0		\$0	0
Additional Codes-Physician Services		99203		Encounter	0	00	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	50	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

Connect Countries				riscar rear.	2000-2007		State of	witchigan
Copper Country Service Category	Revenue Code HCPCS Code Mor	Unit difier Measure	Cases	Units	0 .	G-4/G	G (T. ):	** 5.40
			Cases	Omts	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services	99214	Encounter	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services	99215	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99221		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99222		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99223		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99231		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99232		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99233		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99238	30 Minutes or less	. 0	0	SO	\$0	S0	0
Additional Codes-Physician Services	99241	Encounter	0	0	\$0	SO	\$0	0
Additional Codes-Physician Services	99242	Encounter	0	0	S0	SO	\$0	0
Additional Codes-Physician Services	99243	Encounter	0	0	SO	SO	S0	0
Additional Codes-Physician Services	99244	Encounter	0	0	SO	So	\$0	0
Additional Codes-Physician Services	99245	Encounter	0	0	\$0	So		
Additional Codes-Physician Services	99251	Encounter	0	0	\$0	SO SO	\$0	
Additional Codes-Physician Services	99252	Encounter	0	0	\$0	S0	SO	0
Additional Codes-Physician Services	99253	Encounter	0	0		SO	S0	
Additional Codes-Physician Services	99254	Encounter	0	0	\$0	SO		
Additional Codes-Physician Services	99255	Encounter	0	0	S0	So	\$0	
Additional Codes-Physician Services	99261	Encounter	0	0	S0	\$0		
Additional Codes-Physician Services	99262	Encounter	0	0	SO		S0	
Additional Codes-Physician Services	99263	Encounter	0	0	\$0	S0	S0	0
Additional Codes-Physician Services	99271	Encounter	0	0	\$0	S0	S0	
Additional Codes-Physician Services	99272	Encounter	0	0	SO	\$0	S0	0
Additional Codes-Physician Services	99273	Encounter	0	0	\$0 \$0	S0	S0	
Additional Codes-Physician Services	99274	Encounter	0	0			\$0 \$0	0
Additional Codes-Physician Services	99275	Encounter	0	0	\$0 \$0	S0	S0	0
Medication Administration	99506	Encounter	0	0		\$0 \$0	\$0	
Transportation	A0080	Per mile	0	0				0
Transportation	A0090	Per mile	0	0	\$0	\$0	\$0 \$0	0
Transportation	A0100	Per one-way trip	0	0	\$0			0
Transportation	A0100 A0110	· · · · · · · · · · · · · · · · · · ·	0	0		\$0	\$0	0
		Per one-way trip			\$0	\$0	\$0	0
Transportation	A0120	1 11 11 11 11 11	0	0	<u>\$0</u>	\$0	\$0	0
Transportation	A0130		0	0	\$0	\$0	S0	0
Transportation	A0140	2 24	0	0	\$0	\$0	\$0	0
Transportation	A0160	Per Mile	0	0	\$0	\$0	\$0	0
Transportation	A0170		0	0	\$0	\$0	S0	0
Additional Codes-Transportation	A0425	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	A0427	Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation	A0428		0	0	\$0	\$0	\$0	0
General dental services	D0150		0	00	\$0	\$0	\$0	0
Comp periodontal evaluation	D0180	Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical	D0220		0	0	\$0	\$0	\$0	0
Intraoral periapical	D0230		0	0	\$0	\$0	SO.	0
Bitewings	D0274		0	0	\$0	\$0	\$0	0
Prophylaxis Adult	D1110		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant	D2330		0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant	D2331		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an	D2332		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post	D2391		0	0	\$0	S0	\$0	0
Resin based comp-two surfaces, post	D2392		0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post	D2393		0	0	\$0	\$0	\$0	0
	ALL ALVANDE	<del></del>					·	

#### CMHSP Cost Data by Service Category

CMHSP Cost Data by Service Category			Adults with M	Mental Illness		Fiscal Year	r 2006-2007		State of	Michigan
Copper Country				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0		\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		· · · · · · · · · · · · · · · · · · ·	0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	S0	\$0	0
Family Training/Support EBP only		G0177	-	Encounter	19	131	\$38,353	\$2,019	\$293	7
Substance Abuse: Individual Assessment	-	H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	0	0	\$0	\$0	SO SO	
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	SO		S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	SO	SO SO	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	SO	\$0	So	
Substance Abuse: Case Management		H0006			0	0	S0	\$0	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	S0	SO	So	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	S0	SO	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	SO	SO	S0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	SO	SO	\$0	0
Crisis Residential Services		H0018		Days	28	681	\$192,312	\$6,868	\$282	24
Substance Abuse: Residential	1002	H0018	W	Days	0	0	\$0	\$0	S0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	S0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	S0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	107	127	\$46,346	\$433	\$365	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	99	127	\$29,969	\$303	\$236	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	5	574	\$47,132	\$9,426	\$82	115
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	So	SO	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$65,197	80	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	35	12,482	\$510,983	\$14,600	\$41	357
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	9	28	\$7,562	\$840	\$270	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	175	884	\$113,047	\$646	\$128	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	40	40,172	\$204,535	\$5,113	\$5	1,004
Community Living Supports (15 Minutes)		H2015		15 Minutes	170	41,084	\$464,987	\$2,735	\$11	242
Community Living Supports (Daily)		H2016		Per Diem	2	48	\$1,514	\$757	\$32	24
Community Living Supports (Daily)		H2016	TF	Per Diem	ı	22	\$1,051	\$1,051	\$48	22
Community Living Supports (Daily)		H2016	TG	Per Diem	25	5,562	\$915,550	\$36,622	\$165	222
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	53	7,465	\$115,406	\$2,177	\$15	141
Mental Health Therapy		H2027		15 Minutes	0	0	\$0		\$0	0

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Fiscal Year 2006-2007

Copper Country						1.504.104	2000 2007		54410 01	Michigan
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	38	56,691	\$174,312	\$4,587		1,492
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	1,472
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	S0	0
Medication Review		M0064		Encounter Face-to-Face	177	896	\$152,452	\$861	\$170	5
Transportation		S0209		Per Mile	0	0	\$132,432	\$0	\$0	
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	11	190	\$9,668	\$879	\$51	17
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	***************************************	Days	0	- 0			\$0 S0	
Respite		S5150		15 Minutes	1	584	\$1,046	\$1,046	\$2	584
Respite		S5151	78	Per Diem	0	0	\$0	\$0		0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	S0	\$0		
Personal Emergency Response System (PERS)		S5161		Month	0	0		S0		0
Environmental Modification		S5165		Service	0	0	S0	\$0 \$0		0
Enhanced Medical Equipment-Supplies	11 200.00	S5199		Items	0	0	\$0	S0	\$0	
Occupational or Physical Therapy	***	S8990		Encounter	0	0	\$0		\$0 \$0	0
Health Services		S9445	•	Encounter	1	12	\$660			0
Health Services		S9446		Encounter	0	0	\$000	\$660 \$0	\$55	12
Health Services		S9470		Encounter	0	0	S0	S0	50	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0		\$0 \$0	S0	0
Reidential Room and Board		S9976		Days	0	0	\$0 \$0	\$0 \$0	S0	0
Assessment		T1001		Encounter	9	10			S0	0
Health Services		T1002		Up to 15 min	44	515	\$2,473 \$86,909	\$275 \$1,975	S247	1
Respite Care		T1005		15 Minutes	0	0	\$86,909	\$1,975	\$169	12
Respite Care		T1005	TD	15 Minutes	0	0	\$0 \$0		S0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0 \$0	S0 S0	S0 S0	0
Substance Abuse: Recovery Support Services		T1012	1,2	Encounter	0	0	\$0		\$0	0
Family Psycho-Education		T1012		Encounter	22	48	\$7,610	\$346	\$159	
Supports Coordination/Wrap Facilitation		T1016		15 minutes	195	1,225	\$130,654	\$670	\$107	
Targeted Case Management		T1017		15 minutes	130	3,539	\$339,271	\$2,610	\$96	27
Nursing Home Mental Health Monitoring	*	T1017	SE	15 minutes	7	96	\$8,014	\$1,145	\$83	14
Personal Care in Licensed Specialized Residential Setting		T1020	- OL	Days	26	4,994	\$70,836	\$2,724	\$14	192
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	20	178	\$8,992	\$4,496	\$51	89
Personal Care in Licensed Specialized Residential Setting	_ <del>.</del>	T1020	TG	Days	0	0	\$8,332	\$0	\$0	0
Assessments	<del></del>	T1023		Encounter	256	319	\$154,574	\$604	\$485	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	15	113	\$2,576	\$172	\$23	
Transportation		T2001		Tems	0	0	\$0	\$0	\$0	. 0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2002		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	S0		\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0 \$0	
n in a second se								-		0
Enhanced Medical Equipment-Supplies		T2028		Items	0	1	\$109	\$109	\$109	1
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip		0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	S0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	S0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	S0	
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other		477			0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			27	0	\$68,237	\$2,527	\$0	00

Total Population and Cost					680		\$5,580,047			
Copper Country Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
CMHSP Cost Data by Service Category			Adults with N	Mental Illness		Fiscal Year	State of Michigan			

CMHSP Cost Data by Service Category			Adults with M	Mental Illness		Fiscal Ye	ar 2006-2007		State of	Michigan
Detroit-Wayne				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	348	66,602	\$21,021,362	\$60,406	\$316	191
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	11	492	\$215,988	\$19,635	\$439	45
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1,581	14,415	\$8,004,997	\$5,063	\$555	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	4,900	38,192	\$33,931,235	\$6,925	\$888	8
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	SO	SO	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	SO	SO	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	SO	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	S0	\$0	SO	0
ECT Anesthesia	0370				0	0	SO	S0	SO	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	S0	S0	SO	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	SO	\$0	SO	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	S0	S0	SO	
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	SO	
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	2,360	3,564	\$1,468,850	\$622	\$412	2
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	S0	SO	S0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	S0	C
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	S0	
Crisis Observation Care	0762			Hour	2	2	\$342	\$171	\$171	1
Additional Codes-ECT Facility Charge	0901			Encounter	1	3	\$1,200	\$1,200	\$400	3
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	407	4,055	\$1,259,494	\$3,095	\$311	10
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	(
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	S0	C
Medication Administration		90772		Encounter	2,330	14,267	\$498,776	\$214	\$35	
Assessment-Psychiatric Assessment		90801		Encounter	17,350	25,868	\$4,494,277	\$259	\$174	
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	
Assessment-Psychiatric Assessment		90802		Encounter	26	30	\$4,005	\$154	\$134	1
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy		90804		Encounter 20-30 Min	8,904	42,036	\$2,430,509	\$273	\$58	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	(
Therapy-Individual Therapy		90805		Encounter 20-30 Min	403	1,186	\$73,366	\$182	\$62	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	C
Therapy-Individual Therapy		90806		Encounter 45-50 Min	8,601	43,770	\$5,083,222	\$591	\$116	5

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## CMHSP Cost Data by Service Category

Detroit-Wayne										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	***************************************	90807		Encounter 45-50 Min	983	2,834	\$218,849	\$223	\$77	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	1,364	2,920	\$439,953	\$323	\$151	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	3	3	\$129	\$43	\$43	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	SO	SO	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	3	3	\$212	\$71	S71	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	S0	SO	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	SO	\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	5	13	\$2,055	\$411	\$158	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	SO	SO	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	6	20	\$800	\$133	\$40	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	S0	S0	SO	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	S0	S0	S0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	1	1	\$136	\$136	\$136	1
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	. 0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	. 0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	2	6	\$530	\$265	\$88	3
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	208	688	\$36,204	\$174	\$53	3
Therapy-Family Therapy		90847		Encounter	366	867	\$95,814	\$262	\$111	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	16	41	\$4,812	\$301	\$117	3
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	3,792	30,000	\$1,143,881	\$302	\$38	8
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	S0	\$0	S0	0
Therapy-Group Therapy		90857		Encounter	141	1,261	\$49,255	\$349	\$39	9
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	20,829	102,033	\$8,312,527	\$399	\$81	5

Detroit-Wayne								2
Service Category	Revenue Code HCPCS Code Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 90862 0916, 0919	Encounter	0	0	\$0	\$0	So	0
Additional Codes-ECT Physician	90870	Encounter	1	3	\$150	\$150	\$50	
Assessments-Other	90887	Encounter	1,740	3,226	\$101,811	\$59	\$32	
Speech & Language Therapy	92506	Encounter	1,,,,,	1	\$135	\$135	\$135	2
Speech & Language Therapy	92507	Encounter	0	0	\$0	\$0		
Speech & Language Therapy	92508	Encounter	0	0	\$0 \$0		\$0	0
Speech & Language Therapy	92526	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	92610	Encounter	0	0		\$0	S0	0
Psychological Testing PSYCH/PHYS	96101	Per Hour	46		\$0	\$0	\$0	0
Psychological Testing by Technician	96102	Per Hour	0	215	\$28,443	\$618	\$132	5
Psychological Testing by Comp	96103	Per Hour	0	0	S0	\$0	\$0	
Assessments-Other	96105			0		S0	S0	0
Assessments-Other	96110	Encounter	0	0	S0	\$0		0
Assessments-Other	96111	Encounter	1,265	27,189	\$1,755,712	\$1,388	S65	21
Neurobehavioral Status Exam (Children's Waiver)		Encounter	20	39	\$6,859	\$343	\$176	2
Neuropsych test by Psych/Phys	96116	Per Hour	0	0		\$0	S0	0
	96118	Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech	96119	Per Hour	0	0	S0	\$0	S0	0
Neuropsych test Admin w/Comp	96120	Per Hour	0	0	S0	SO	S0	0
Physical Therapy	97001	Encounter	0	0	S0_	S0	\$0	0
Physical Therapy	97002	Encounter	0	0	\$0	S0	S0	0
Occupational Therapy	97003	Encounter	118	129	\$24,622	\$209	\$191	1
Occupational Therapy	97004	Encounter	61	64	\$9,288	\$152	\$145	1
Occupational or Physical Therapy	97110	15 Minutes	31	175	\$5,012	\$162	\$29	6
Occupational or Physical Therapy	97112	15 Minutes	0	0	S0	\$0	S0	0
Occupational or Physical Therapy	97113	15 Minutes	0	0	S0	\$0	S0	0
Occupational or Physical Therapy	97116	15 Minutes	. 0	0	\$0	S0	\$0	0
Occupational or Physical Therapy	97124	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97140	15 Minutes	0	0	\$0	\$0	SO	0
Occupational or Physical Therapy	97150	Encounter	642	8,375	\$118,588	\$185	\$14	13
Occupational or Physical Therapy	97530	15 Minutes	48	432	\$11,457	\$239	\$27	9
Occupational or Physical Therapy	97532	15 Minutes	1	15	\$2,025	\$2,025	\$135	15
Occupational or Physical Therapy	97533	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97535	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97537	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy	97542	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy	97703	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy	97750	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy	97755	15 Minutes	0	0	\$0	\$0	SO	0
Occupational Therapy	97760	15 Minutes	0	0	\$0	SO	\$0	0
C/O for Orthotic/Prosth Use	97762		0	0	\$0	\$0	\$0	0
Assessment or Health Services	97802	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services	97803	15 Minutes	0	0	\$0	\$0	\$0	0
Health Services	97804	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99201	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99202	Encounter	0	0	\$0		\$0	
Additional Codes-Physician Services	99203	Encounter		0	\$0		\$0	0
Additional Codes-Physician Services	99204	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99205	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99211	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99212	Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services  Additional Codes-Physician Services	99212	Encounter	0	0	\$0	\$0 \$0	\$0	0
Additional Codes-rhysician Services	99413	Encounter	U	U		20	\$0	0

Fiscal Year 2006-2007

Detroit-Wayne										<i>9</i>
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215	-	Encounter	0	0	\$0		S0	
Additional Codes-Physician Services		99221			<u>_</u>	0	\$0	\$0		0
Additional Codes-Physician Services		99222			1,047	1,295	\$121,699	\$116	\$94	- 0
Additional Codes-Physician Services		99223			1	1,275	\$101	\$101	\$101	<u>1</u>
Additional Codes-Physician Services		99231			217	957	\$96,361	\$444	\$101	
Additional Codes-Physician Services		99232			840	4,425	\$356,310	\$424	S81	
Additional Codes-Physician Services		99233	_		175	204	\$12,307	\$70	\$60	
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$12,507 \$0	\$10	\$00	
Additional Codes-Physician Services		99241	-	Encounter	0	0	\$0			
Additional Codes-Physician Services	_	99242		Encounter	0	0	S0	S0		0
Additional Codes-Physician Services		99243		Encounter	0					0
Additional Codes-Physician Services		99244		Encounter	0	0	S0			
Additional Codes-Physician Services		99245	-	Encounter	0	0	\$0	SO	S0	
Additional Codes-Physician Services		99251	**	Encounter	30	31	\$956	\$32	\$31	1
Additional Codes-Physician Services		99252		Encounter	97	118	\$10,420	\$107	\$88	
Additional Codes-Physician Services		99253	-	Encounter	205	236	\$16,309	\$80	S69	1
Additional Codes-Physician Services	****	99254		Encounter	62	71	\$5,819	\$94	\$82	
Additional Codes-Physician Services		99255	4.0.44	Encounter	23	23	\$2,695	\$117	S117	1
Additional Codes-Physician Services		99261		Encounter	0	0	\$0 S0	so		0
Additional Codes-Physician Services		99262		Encounter	3	4	\$108	\$36	\$27	1
Additional Codes-Physician Services		99263	*****	Encounter	18	24	\$960	\$53	S40	1
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	so		
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	SO	SO SO	
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	SO SO	S0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	73	289	\$28,509	\$391	\$99	4
Transportation		A0080	-	Per mile	0	0	SO	\$0	\$0	
Transportation		A0090		Per mile	0	0	\$0	SO	\$0	0
Transportation	4	A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			12	12	\$507	\$42	\$42	1
Transportation		A0130	-		0	0	\$0	\$0	\$0	0
Transportation		A0140			0 .	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	791	17,108	\$63,476	\$80	\$4	22
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	S0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	S0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	50	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

Detroit-Wayne				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	S0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920				0		\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	59	232	\$23,064	\$391	\$99	4
Substance Abuse: Individual Assessment		H0001		Encounter	1,264	9,695	\$403,381	\$319	\$42	
Assessment		H0002		Encounter	1,835	2,286	\$99,323	\$54	S43	<u></u>
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0 \$0	S0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004	**	15 Minutes	0	0	So	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	\$0	SO	0
Substance Abuse: Case Management	,	H0006			0	0	\$0		So	
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0			
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	- 0	0	S0	S0		0
Substance Abuse: Sub-Acute Detoxification	1002	H0014	*****	Days	0	0				0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0 \$0	\$0	0
Crisis Residential Services		H0018	-	Days	159	1,280	\$422,400	\$2,657	\$330	8
Substance Abuse: Residential	1002	H0018		Days	0	0	S0	\$0 \$0	SO.	0
Substance Abuse: Residential	1002	H0019		Days	0	0	SO			
Substance Abuse: Methadone		H0020		Encounter	0	0	S0	\$0	S0	
Substance Abuse: Early Intervention		H0022		Encounter	0	0	S0	\$0	So	0
Peer Directed and Operated Support Services		H0023		Encounter	467	17,773	\$584,717	\$1,252	\$33	38
Prevention Services - Direct Model		H0025		Face to Face Contact	4	36	\$7,073	\$1,768	\$196	9
Assessment		H0031		Encounter	14,149	27,895	\$3,311,598	\$234	\$119	
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	
Treatment Planning		H0032		Encounter	11,792	25,909	\$2,494,133	\$212	\$96	2
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0			0
Health Services	· · · · · · · · · · · · · · · · · · ·	H0034		15 Minutes	1,697	5,901	\$152,122	\$90	\$26	3
Home Based Services		H0036		15 Minutes	126	11,650	\$562,891	\$4,467	\$48	92
Community Psychiatric Supportive Treatment	· · · · · · · · · · · · · · · · · · ·	H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	568	6,241	\$24,525	\$43	\$4	11
Peer Directed and Operated Support Services	- Care	NA		15 11111400	0	0,2.11	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	1,299	305,310	\$9,641,738	\$7,422	\$32	235
Community Living Supports in Independent living/own home		H0039		Per diem	639	42,365	\$2,179,139	\$3,410	\$51	66
Respite		H0045		Per Diem	0	42,363	\$2,179,139	\$3,410	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0		\$0	\$0 \$0	\$0	0
Behavior Management Review		H2000		Encounter	109	281	\$13,368	\$123	\$48	3
		H2010		15 minutes	0	0	\$13,368	\$123	\$0	0
Comprehensive Medication Services - EBP only								· · · · · · · · · · · · · · · · · · ·	\$14	
Crisis Intervention		H2011		15 Minutes	3,679	81,307	\$1,115,664	\$303		22
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	1,955	2,408,233	\$8,148,016	\$4,168	\$3	1,232
Community Living Supports (15 Minutes)		H2015		15 Minutes	771	1,331,333	\$1,920,163	\$2,490	\$1	1,727
Community Living Supports (Daily)		H2016	T	Per Diem	3,190	392,510	\$26,162,008	\$8,201	\$67	123
Community Living Supports (Daily)		H2016	TF	Per Diem	1,738	271,116	\$14,824,800	\$8,530	\$55 670	156
Community Living Supports (Daily)	<del>.</del>	H2016	TG	Per Diem	175	33,162	\$2,582,006	\$14,754	\$78	189
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	
Wraparound		H2021		15 Minutes	12	79	\$9,420	\$785	\$119	7
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	354	35,188	\$184,944	\$522	\$5	99
Mental Health Therapy	987	H2027		15 Minutes	0	0	\$0	\$0	\$0	0

Detroit-Wayne				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	925	1,456,897	\$6,547,791	\$7,079	\$4	1,575
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	
Medication Review		M0064		Encounter Face-to-Face	1,175	2,374	\$60,008	\$51	\$25	
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	
Transportation		S0215	,	Per Mile	7	712	\$1,286	\$184	\$2	102
Family Training		S5110		15 Minutes	10	240	\$8,110	S811	\$34	24
Family Training		S5111		Encounter	102	181	\$9,701	\$95	\$54	2
Foster Care		S5140		Days	0	0	\$0	\$0	S0	0
Foster Care		S5145		Days	1	151	\$29,596	\$29,596	\$196	151
Respite		S5150		15 Minutes	0	0	\$0	SO SO	\$0	0
Respite		S5151		Per Diem	0	0	S0	\$0	So	
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	S0	S0	S0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	SO	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	S0	\$0	SO SO	
Occupational or Physical Therapy		S8990		Encounter	0	0	SO	50	SO	0
Health Services		S9445		Encounter	7,032	26,397	\$1,045,040	\$149	\$40	4
Health Services		S9446		Encounter	551	7,245	\$170,217	\$309	\$23	13
Health Services		S9470	-	Encounter	0	0	\$0	\$0	SO	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	1,057	6,599	\$424,134	\$401	\$64	6
Reidential Room and Board		S9976		Days	0	0	\$0	\$0	S0	0
Assessment		T1001		Encounter	6,909	14,426	\$799,449	\$116	\$55	2
Health Services		T1002		Up to 15 min	4,486	19,047	\$706,907	\$158	\$37	4
Respite Care		T1005		15 Minutes	1	382	\$1,210	\$1,210	\$3	382
Respite Care		T1005	TD	15 Minutes	0	0	\$0	S0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	12	42	\$5,043	\$420	\$120	4
Supports Coordination/Wrap Facilitation		T1016		15 minutes	197	3,210	\$307,908	\$1,563	\$96	16
Targeted Case Management		T1017		15 minutes	15,341	418,363	\$16,930,070	\$1,104	\$40	27
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0		50	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	2,980	430,657	\$13,530,181	\$4,540	S31	145
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	1,220	159,078	\$7,977,540	\$6,539	\$50	130
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	134	25,892	\$2,515,546	\$18,773	\$97	193
Assessments		T1023		Encounter	37	46	\$11,214	\$303	\$244	11
Enhanced Medical Supplies or Pharmacy		T1999		Items	28	38	\$18,700	\$668	\$492	<u> </u>
Transportation		T2001		P. P.	0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	2,226	4,555	S451,006	\$203	\$99	2
Transportation		T2004			0	0	\$0	\$0		0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	08	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036 T2037		Encounter / Trip Encounter / Trip	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Community Living Supports-Therapeutic Camping	<u> </u>	T2037		Encounter / 1 rip  Month	1	9	\$6,444	\$6,444	\$716	9
Housing Assistance Enhanced Medical Equipment-Supplies		T2039		Items	0			\$6,444	\$716	0
Pharmacy (Drugs and Other Biologicals)		12037		rights	0	0	S0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
		ALL			0	0		\$0		0
Aggregate for 'J' Codes					· · · · · · · · · · · · · · · · · · ·	U		30	30	

CMHSP Cost Data by Service Category			Adults with M	Iental Illness		Fiscal Year 2006-2007				State of Michigan		
Detroit-Wayne Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case		
Total Population and Cost					34,290		\$217,997,013					

						1 13041 1 04	1 2000-2007		Diate Of	whenigan
Genesee Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	48	9,899	\$3,644,416	\$75,925	\$368	206
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	1,078	10,600	\$5,764,410	\$5,347	\$544	10
Inpatient Hospital Ancillary Services - Room and Board	0144	,		Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	S0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	S0	SO	\$0	
ECT Anesthesia	0370				0	0	S0	SO	SO	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	S0	SO	SO	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	S0	SO	S0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	SO	\$0	So	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	S0	SO	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		# of visits	0	0	S0	\$0	S0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	SO	50	50	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	SO	SO	SO	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	S0	SO	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	S0	SO	S0	0
ECT Recovery Room	0710				0	0	S0	S0	S0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	S0	SO	S0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	SO SO	S0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	185	1,344	\$365,559	\$1,976	\$272	7
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	S0	0
Additional Codes-ECT Anesthesia		00104	··	Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	375	4,348	\$120,300	\$321	\$28	12
Assessment-Psychiatric Assessment		90801		Encounter	2,728	2,984	\$479,891	\$176	\$161	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	46	94	\$3,877	\$84	\$41	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	SO	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	909	4,799	\$297,678	\$327	\$62	5

Genesee										ū
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	<u> </u>	90807		Encounter 45-50 Min	0	0	\$0	So	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	1	1	\$92	\$92	\$92	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0		\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	S0		
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0			\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	SO	SO	SO	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	SO	SO	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	SO	SO	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	So	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	50	\$0	S0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	40	323	\$20,995	\$525	\$65	8
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	. 0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	So	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy) Therapy-Individual Therapy		90826		Encounter 45-50 Min Encounter 45-50 Min	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy	<u> </u>	90828		Encounter 45-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0		\$0	
Therapy-Family Therapy	MM-17 No.	90846		Encounter	0	0	\$0		\$0	0
Therapy Family Therapy  Therapy-Family Therapy		90847		Encounter	2	3	\$249	\$125	S83	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	,	90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	SO	0
Therapy-Group Therapy		90853		Encounter	29	183	\$4,727	\$163	\$26	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	SO	\$0	0
Therapy-Group Therapy		90857		Encounter	1	8	\$460	\$460	\$58	8
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	So	SO	SO	0
Medication Review		90862		Encounter	3,301	12,337	\$1,328,234	\$402	\$108	4

Genesee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	*	92506		Encounter	1	1	\$207	\$207	\$207	1
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	S0	\$0	SO	0
Speech & Language Therapy	10.00	92610		Encounter	9	38	\$7,861	\$873	\$207	4
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	S0	\$0	\$0	0
Psychological Testing by Technician		96102		Per Hour	0	0	\$0	SO		
Psychological Testing by Comp		96103		Per Hour	0	0	\$0	SO	SO	0
Assessments-Other		96105		Encounter	0	0	\$0			
Assessments-Other		96110		Encounter	2	2	\$414	\$207	\$207	1
Assessments-Other		96111		Encounter	1	1	\$0	S0	S0	1
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	S0	\$0		
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	S0	0
Neuropsych test by Tech		96119		Per Hour	0	0		\$0	S0	
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	SO	\$0		
Physical Therapy		97001		Encounter	5	5	\$1,034	\$207	\$207	<u>-</u>
Physical Therapy	-	97002		Encounter	7	21	\$4,344	\$621	\$207	3
Occupational Therapy	7000	97003		Encounter	43	48	\$9,930	S231	\$207	1
Occupational Therapy	.,	97004	***	Encounter	42	84	\$17,378	\$414	S207	
Occupational or Physical Therapy	· · · · · · · · · · · · · · · · · · ·	97110		15 Minutes	0	0	\$0	So	S0	
Occupational or Physical Therapy		97112		15 Minutes	0	0	SO	S0	S0	
Occupational or Physical Therapy		97113		15 Minutes	0	0		\$0		
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	S0	
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97140		15 Minutes	0	0	So	\$0	\$0	0
Occupational or Physical Therapy		97150	-	Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	S0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy	, ,	97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	53	233	\$48,203	\$909	\$207	4
Assessment or Health Services		97803		15 Minutes	68	339	\$70,132	\$1,031	\$207	5
Health Services	· -	97804	<del>-</del>	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	*	99211		Encounter	0	0		\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	8	11	\$1,952	\$244	\$177	1
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Genesee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0		\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			20	21	\$811	\$41	\$39	
Additional Codes-Physician Services		99222			14	14	\$858	\$61	\$61	1
Additional Codes-Physician Services		99223			3	3	\$232	\$77	\$77	1
Additional Codes-Physician Services		99231			35	161	\$3,254	\$93	\$20	5
Additional Codes-Physician Services		99232	•		26	42	\$1,230	\$47	\$29	
Additional Codes-Physician Services		99233			2	2	\$79	\$39	\$39	1
Additional Codes-Physician Services		99238		30 Minutes or less	6	6	\$175	\$29	\$29	1
Additional Codes-Physician Services		99241		Encounter	0	0	SO	S0	\$0	
Additional Codes-Physician Services		99242		Encounter	0	0	S0	50	S0	0
Additional Codes-Physician Services		99243		Encounter	0	0	S0	\$0 \$0		
Additional Codes-Physician Services		99244		Encounter	0	0	S0			— · — — 0
Additional Codes-Physician Services		99245		Encounter	0	0		\$0		
Additional Codes-Physician Services		99251		Encounter	0	0		\$0	\$0	
Additional Codes-Physician Services		99252		Encounter	2	2	S84	\$42	S42	
Additional Codes-Physician Services		99253		Encounter	90	99	\$5,359	\$60	S54	<u>1</u>
Additional Codes-Physician Services		99254		Encounter	15	16	\$1,195	\$80	\$75	1
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services		99261		Encounter	0	0		SO	\$0	
Additional Codes-Physician Services		99262		Encounter	0	0	S0	\$0		
Additional Codes-Physician Services		99263		Encounter	0	0	SO SO	\$0	S0	
Additional Codes-Physician Services		99271		Encounter	0	0		S0	S0	
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	SO SO	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	S0	\$0	S0	
Additional Codes-Physician Services		99274		Encounter	0	0	S0	\$0		
Additional Codes-Physician Services	•	99275		Encounter	0	0	\$0	\$0		
Medication Administration		99506		Encounter	102	983	\$66,986	\$657	\$68	10
Transportation		A0080		Per mile	0	0	S0	so	\$0	0
Transportation	180	A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100	·	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	S0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	24	1,139	\$4,841	\$202	\$4	47
Additional Codes-Transportation		A0427	2.02	Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			25	26	\$3,101	\$124	\$119	1
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	S0	0
Resin based comp-two surfaces, ant		D2331			0	0	S0	\$0	So	0
Resin based comp-three surfaces, an		D2332			0	0	S0	\$0	SO	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	SO	0
Resin based comp-three surfaces, post		D2393			0	0		\$0	\$0	

Genesee										J
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	\$0	S0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	
Alveoloplasty in conjunction with extractions, per quadrant		D7310		-	0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	SO	\$0	\$0	
Family Training/Support EBP only		G0177		Encounter	4	168	S0	SO	\$0	42
Substance Abuse: Individual Assessment		H0001		Encounter	199	211	\$14,746	\$74	\$70	1
Assessment		H0002		Encounter	3,223	3,514	\$894,946	S278	\$255	
Substance Abuse: Individual Assessment		H0002		Encounter	1,875	2,514	\$192,950	\$103	\$77	<u>l</u>
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	1,656	42,157	\$664,212	\$401	\$16	25
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	1,064	14,187	\$278,147	\$261	\$20	13
Substance Abuse: Case Management		H0006			50	1,056	\$39,331	\$787	\$37	
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	339,331 S0	\$0 \$0	S0	21
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	209	568	\$116,213	\$556	\$205	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$116,213 S0	\$336	\$205 \$0	3
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	269	2,635	\$245,284	S912	\$93	10
Crisis Residential Services	- i - i - i - i - i - i - i - i - i - i	H0018		Days	549	3,545	\$841,122	\$1,532	S237	6
Substance Abuse: Residential	1002	H0018		Days	588	13,448	\$1,218,993	\$2,073	\$91	
Substance Abuse: Residential	1002	H0019		Days	39	2,975	\$351,557	\$9,014	\$118	76
Substance Abuse: Methadone		H0020		Encounter	223	49,844	\$203,364	\$9,014 \$912	S4	224
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$203,364 \$0	\$0		0
Peer Directed and Operated Support Services		H0023	****	Encounter		0			\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact		0		S0	S0	
Assessment		H0031		Encounter	2,080	3,135	\$389,177	\$187	\$124	
Substance Abuse: Assessment		H0031		Encounter	0	0	\$00,177 \$0	\$0	\$124	0
Treatment Planning		H0032		Encounter	265	326	\$35,245	\$133	S108	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	S0	0
Health Services		H0034		15 Minutes	2	2	\$100	\$50	\$50	
Home Based Services		H0036		15 Minutes	- 0	0	\$100 \$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem				\$0		
Peer Directed and Operated Support Services		H0038		15 minutes	160	5,967	\$1,203,946	\$7,525	\$202	37
Peer Directed and Operated Support Services		NA	1-1-2	15 milates	0	0,507	\$1,203,940	\$0	\$202	
Assertive Community Treatment (ACT)		H0039		15 Minutes	421	80,805	\$4,079,627	\$9,690	\$50	192
Community Living Supports in Independent living/own home		H0043		Per diem	0	0 0,803	\$4,079,027 \$0	\$9,090	\$30	0
Respite		H0045		Per Diem	0	0		\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0		\$0 \$0	\$0	
Behavior Management Review		H2000		Encounter	76	95	\$7,889	\$104	\$83	
Comprehensive Medication Services - EBP only		H2000		15 minutes	0	93	\$7,889	\$104	\$0	0
Crisis Intervention		H2011		15 Minutes	2,021	22,898	\$864,686	\$428	\$38	
Skill-Building and Out of Home Non Vocational Habilitation	*****	H2014		15 minutes	141	312,397	\$831,193	\$5,895	\$38	2,216
Community Living Supports (15 Minutes)		H2015		15 Minutes	72	74,186	\$256,299	\$3,560	\$3	1,030
Community Living Supports (Daily)		H2016 H2016	TF	Per Diem	19	4,141 8,178	\$100,856	\$5,308	\$24	218
Community Living Supports (Daily)			TG	Per Diem			\$397,379	\$9,461	\$49	195
Community Living Supports (Daily)		H2016	10	Per Diem	201	50,704	\$4,996,289	\$24,857	\$99	252
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	<u></u>	\$0		\$0	0
Supported Employment Services		H2023		15 minutes	42	6,845	\$42,781	\$1,019	\$6	163
Mental Health Therapy		H2027		15 Minutes	<u> </u>	U	S0	\$0	- \$0	0

## CMHSP Cost Data by Service Category

Genesee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	138	226,971	\$1,110,915	\$8,050	\$5	1,645
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	636	1,150	\$89,875	\$141	\$78	2
Transportation		S0209		Per Mile	0	0	S0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	1	1	\$197	\$197	\$197	1
Foster Care		S5140		Days	0	0	S0	SO	S0	0
Foster Care		S5145		Days	0	0	\$0	\$0	SO	0
Respite		S5150		15 Minutes	0	0	SO	S0	\$0	0
Respite		S5151		Per Diem	0	0	S0	SO	S0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	SO	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	So	SO	\$0	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	S0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	SO	S0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	SO	S0	\$0	0
Health Services		S9445		Encounter	120	209	\$39,718	\$331	\$190	2
Health Services		S9446		Encounter	7	7	\$476	\$68	\$68	1
Health Services		S9470		Encounter	66	115	\$23,664	\$359	\$206	2
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	590	4,371	\$607,831	\$1,030	\$139	7
Reidential Room and Board		S9976		Days	80	1,136	\$3,158	\$39	\$3	14
Assessment		T1001		Encounter	136	146	\$10,216	\$75	\$70	1
Health Services		T1002		Up to 15 min	377	3,806	5364,778	\$968	\$96	10
Respite Care		T1005		15 Minutes	8	11,390	\$34,967	\$4,371	\$3	1,424
Respite Care		T1005	TD	15 Minutes	0	0	S0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	SO	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	So	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	1	2	\$0	\$0	\$0	2
Supports Coordination/Wrap Facilitation		T1016		15 minutes	13	320	\$13,939	\$1,072	\$44	25
Targeted Case Management		<b>T</b> 1017		15 minutes	3,275	181,647	\$8,469,283	\$2,586	\$47	55
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	1	2	\$120	\$120	\$60	2
Personal Care in Licensed Specialized Residential Setting		T1020		Days	26	5,624	\$134,152	\$5,160	\$24	216
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	28	5,209	\$266,926	\$9,533	\$51	186
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	50	8,017	\$657,363	\$13,147	\$82	160
Assessments		T1023		Encounter	2,086	3,497	\$502,939	\$241	\$144	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			00	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	1	48	\$491	\$491	\$10	48
Transportation		T2003		Encounter / Trip	80	10,511	\$199,231	\$2,490	\$19	131
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0		\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	6	33	\$3,555	\$593	\$108	6
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	. \$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	S0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	339	1,251	\$231,937	\$684	\$185	4
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	S0	\$0	\$0	0
Other					84	0	\$7,921	\$94	\$0	0
Aggregate for 'J' Codes		ALL			329	0	\$783,618	\$2,382	\$0	

Total Population and Cost					9,168		\$44,104,149			
Genesee Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
CMHSP Cost Data by Service Category		Adults with M	lental Illness	Fiscal Yea	State of Michigan					

Therapy-Individual Therapy

Therapy-Individual Therapy

Substance Abuse: Outpatient Treatment

Michigan Department of Community Health 05/31/2008 Page 2c2- 71

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 45-50 Min

0

0

41

0

0

182

S0

\$0

\$30,698

50

SO

\$749

SO

SO

\$169

90805

90805

90806

0900, 0914, 0915,

0916, 0919

Control Cost Butt by Service Cutegory			riddits with	Wichtai Hilless		riscai Year	2006-2007		State of	Michigan
Gogebic	Revenue Code	HCPCS Code	24 115	Unit		•				
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	SO	\$0	So	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	SO	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	S0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	SO	\$0	S0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	S0	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy	1.479.C	90813		Encounter 45-50 Min	0	0	S0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	S0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	S0	\$0	S0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0		\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	S0	\$0	0
Therapy-Individual Therapy		90824 90826		Encounter 20-30 Min Encounter 45-50 Min	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Therapy-Individual Therapy Substance Abuse: Psychotherapy (Individual Therapy)	- A LILLANDAY	90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	S0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1	1	\$104	\$104	\$104	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	S0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	23	181	\$15,667	\$681	\$87	8
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	96	366	\$94,820	\$988	\$259	4

State of Michigan

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Gogebic Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870	o un s	Encounter	0	0	\$0	\$0	S0	0
Assessments-Other	W F = 111	90887		Encounter	3	4	\$578	\$193	\$145	
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$143	
Speech & Language Therapy		92507		Encounter	0	0		\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0 \$0	\$0	\$0 \$0	0
Speech & Language Therapy		92526		Encounter	- 0	- 0	S0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0		S0		
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0		S0		
Psychological Testing by Technician	****	96102		Per Hour	0	0	\$0 \$0	S0	<u>\$0</u>	0
Psychological Testing by Comp		96103		Per Hour	0	0	\$0 \$0	S0	S0	0
Assessments-Other		96105		Encounter	0	0		\$0 \$0	S0	0
Assessments-Other	***	96110		Encounter	0	0		\$0 S0	S0	
Assessments-Other		96111		Encounter	0	0	S0	S0	S0	
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0 \$0			0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	S0			0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0 \$0	\$0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	S0	S0	S0 S0	
Physical Therapy		97001		Encounter	0	0	S0	S0	S0	
Physical Therapy		97002		Encounter	0	0	S0	S0		
Occupational Therapy		97003		Encounter			\$468	\$468	\$468	<u>_</u>
Occupational Therapy		97004		Encounter	0	0	\$468 \$0	\$468 \$0	\$468 \$0	1
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0 \$0	\$0		0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0 \$0	\$0		
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0 \$0		\$0	
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0 \$0		S0	
Occupational or Physical Therapy	H	97124		15 Minutes	0	0	\$0	\$0 \$0	S0	
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0 \$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0		\$0	
Occupational or Physical Therapy	1	97532		15 Minutes	0	0	\$0		\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0		0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0 \$0	
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0 S0	\$0	\$0	
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	S0	\$0		0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99204		Encounter	0	0	S0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services	an-	99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	S0	\$0	\$0 \$0	0
Additional Codes-1 Hysician Sci Fiees		77217		Encounter	· · · · · · · · · · · · · · · · · · ·		30		30	

Gogebic				Unit						J
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0		0
Additional Codes-Physician Services		99221			9	11	\$660	\$73	\$60	1
Additional Codes-Physician Services		99222	_		0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			8	50	\$3,000	\$375	\$60	6
Additional Codes-Physician Services		99232			0	0	\$0	SO	S0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	SO		
Additional Codes-Physician Services		99241		Encounter	0	0	S0			
Additional Codes-Physician Services		99242		Encounter	0	0	\$0	SO SO		0
Additional Codes-Physician Services		99243		Encounter	0	0	S0	SO	So So	
Additional Codes-Physician Services		99244		Encounter	0	0	S0	SO		0
Additional Codes-Physician Services		99245		Encounter	0	0	SO	SO		
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	SO SO	\$0	
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	SO	S0	0
Additional Codes-Physician Services		99253		Encounter	0	0	So	\$0		0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0 \$0	So		0
Additional Codes-Physician Services		99255		Encounter		0	S0	SO		0
Additional Codes-Physician Services		99261	_	Encounter	0	0	\$0	SO	\$0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	so		0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	so	S0	
Additional Codes-Physician Services		99271		Encounter	0	0	SO SO	SO	\$0	
Additional Codes-Physician Services		99272		Encounter	0	0	So	so		
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	<del></del>	99274		Encounter	0	0	SO SO	\$0	S0	
Additional Codes-Physician Services		99275	_	Encounter	0	0	\$0	\$0	SO SO	
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	SO	\$0	SO	0
Transportation		A0090		Per mile	0	0	\$0	\$0	S0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	S0	0
Transportation		A0120			0	0	S0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	S0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230	-		0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	so	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post	-	D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
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Gogebic Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth	<del></del>	D7210			0	0	\$0	\$0	\$0 \$0	
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	-	E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	15	88	\$5,914	\$394	\$67	6
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0
Assessment		H0002		Encounter	114	125	\$21,308	\$187	\$170	
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$21,308			
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	H0004		15 Minutes	0	- 0		S0 S0	<u>\$0</u>	- 0
	0916, 0919	110001		13 Minutes	U	U	50	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	S0	SO	SO	0
Substance Abuse: Case Management		H0006			0	0	\$0	SO	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	- 0	S0	S0	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0		S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	S0	\$0		0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	SO	\$0	\$0	0
Crisis Residential Services		H0018	1	Days	0	0	\$0	\$0	S0	0
Substance Abuse: Residential	1002	H0018	*	Days	0	0	S0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019	*	Days	0	0	SO	\$0	S0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	S0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	S0		SO	0
Peer Directed and Operated Support Services		H0023		Encounter	23	305	\$6,298	\$274	\$21	13
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	98	109	\$53,669	\$548	\$492	<u></u>
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	
Treatment Planning		H0032		Encounter	38	50	\$17,642	\$464	\$353	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	7	1,455	\$70,437	\$10,062	\$48	208
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$10,002	\$0	0
Peer Directed and Operated Support Services		H0038	·	15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA NA		13 minutes	0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	32	6,319	\$300,458	\$9,389	\$48	197
Community Living Supports in Independent living/own home		H0043	-	Per diem	0	0,519	\$00,438	\$9,389	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0		\$0	\$0	0
Behavior Management Review		H2000		Encounter	1	1	\$267	\$267	\$267	1
Comprehensive Medication Services - EBP only		H2000		15 minutes	0	0	\$207	\$0	\$207	0
				15 Minutes	140					
Crisis Intervention Skill-Building and Out of Home Non Vocational Habilitation		H2011 H2014		15 minutes	7	902	\$37,226 \$393	\$266 \$56	\$41 \$2	27
		H2014 H2015		15 Minutes	46	3,544	\$393	\$669	\$2 \$9	77
Community Living Supports (15 Minutes)  Community Living Supports (Daily)		H2015		Per Diem	0	3,544	\$30,762	200	\$9	0
Community Living Supports (Daily)  Community Living Supports (Daily)		H2016	TF	Per Diem Per Diem	0	0	\$0	\$0	\$0	0
The state of the s		H2016	TG	Per Diem	11	1,563	\$261,912	\$23,810	\$168	142
Community Living Supports (Daily)  Behavior Services		H2016	19	15 Minutes	0	1,363	\$261,912	\$23,810	\$108	0
		H2019 H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021			0	0	\$0	\$0	\$0	0
Wraparound	·	H2022 H2023	** ***	Days 15 minutes	15					
Supported Employment Services			· <u> </u>		0	2,627	\$56,402	\$3,760	\$21	175
Mental Health Therapy		H2027		15 Minutes	U	U	\$0	\$0	\$0	00

			Tradits With	Trental Inness		riscal fea	1 2000-2007		State of	Michigan
Gogebic Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0					
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036	· - · · -	Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	S0	\$0	\$0	0
Transportation		S0209		Per Mile	0		\$0	\$0	\$0_	0
Transportation		S0215		Per Mile	0	0	\$0 \$0	\$0 \$0	\$0	0
Family Training	<u> </u>	S5110		15 Minutes	. 5	100	\$4,618		\$0	0
Family Training		S5111		Encounter	0	0		S924	\$46	
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Days	0	0	S0	S0		0
Respite		S5150		15 Minutes	0	0			S0	. 0
Respite		S5151		Per Diem	0	0		50	S0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0			S0	S0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	S0	\$0	S0	
Environmental Modification		S5165		Service	0	0	S0	S0	S0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	<del></del>	\$0	S0	S0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	S0	\$0	
Health Services		S9445		Encounter		0	S0	S0	S0	0
Health Services		S9446			0	0	S0	\$0	S0	0
Health Services		S9446 S9470		Encounter	14	58	\$17,696	\$1,264	\$305	4
Intensive Crisis Stabilization-Enrolled Program		S9470		Encounter	0	0	S0	\$0	S0	0
Reidential Room and Board	···	S9976		Hour	0	0	\$0	S0	\$0	0
Assessment				Days	0	0	\$0	S0	S0	0
Health Services		T1001		Encounter	1	1	\$316	\$316	\$316	1
The state of the s		T1002		Up to 15 min	5	9	\$687	\$137	\$76	2
Respite Care		T1005		15 Minutes	0	0	\$0	\$0	S0	0
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	50	. 0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0		\$0	S0	0
Family Psycho-Education		T1015		Encounter	7	14	\$1,797	\$257	\$128	2
Supports Coordination/Wrap Facilitation		T1016		15 minutes	117	4,509	\$209,353	\$1,789	S46	39
Targeted Case Management		T1017		15 minutes	20	776	\$35,836	\$1,792	\$46	39
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	4	57	\$2,632	\$658	S46	14
Personal Care in Licensed Specialized Residential Setting		T1020		Days	11	1,563	\$33,917	\$3,083	\$22	142
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	43	. 59	\$16,495	\$384	\$280	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	02	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	S0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping	-	T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			5	0	\$6,551	\$1,310	\$0	0
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CMHSP Cost Data by Service Category			Adults with M	with Mental Illness Fiscal Year 2006-2007					State of Michigan		
Gogebic Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
Total Population and Cost				***	349		\$1,785,545				

CMHSP Cost Data by Service Category			Adults with M	fental Illness		Fiscal Yea	r 2006-2007		State of	Michigan
Gratiot				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	293	\$79,544	\$79,544	\$271	293
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1	33	\$22,223	\$22,223	\$673	33
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	48	264	\$177,783	\$3,704	\$673	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	SO	\$0	\$0	
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	SO	So	S0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	S0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320	-		# of tests	0	0	S0	S0		0
ECT Anesthesia	0370				0	0	S0	So	SO	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	S0	S0	
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	SO	S0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	SO	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	SO	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	S0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	S0	S0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0 .	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	S0	\$0	0
ECT Recovery Room	0710				0	0	\$0	S0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	SO	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	S0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0		\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	29	201	\$95,608	\$3,297	\$476	7
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	. 0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90801		Encounter	69	69	\$23,862	\$346	\$346	11
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	S0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	S0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	2000 0011 0015	90804		Encounter 20-30 Min	43	61	\$3,661	\$85	\$60	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min		0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	S0	\$0	0

Therapy-Individual Therapy

Michigan Department of Community Health

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Encounter 45-50 Min

138

1,413

\$166,480

\$1,206

\$118

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90806

State of Michigan

Fiscal Year 2006-2007

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Gratiot Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806	*	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	·	90808	•	Encounter 75-80 Min	5	5	\$726	\$145	\$145	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	SO	S0	SO	
Therapy-Individual Therapy		90810		Encounter 20-30 Min	1	. 1	\$75	\$75	S75	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	. 0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	SO	SO	SO	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	SO	S0		
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	S0	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	S0	S0	SO	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	S0	\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	S0	S0	So	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	SO	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	SO	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	S0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	. S0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	50	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	. 0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0		\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	7	9	\$1,008	\$144	\$112	I
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	S0	0
Therapy-Group Therapy		90853		Encounter	6	136	\$7,711	\$1,285	\$57	23
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	S0	
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0 	\$0	0
Medication Review		90862		Encounter	235	996	\$164,141	\$698	\$165	4

Gratiot						r ioear i car	2000 2007		State of	witchingan
Service Category	Revenue Code HCP	CS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 90 0916, 0919	0862		Encounter	• 0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		0870		Encounter	0	0	\$0		\$0	
Assessments-Other		0887		Encounter	0	0	\$0			0
Speech & Language Therapy		2506		Encounter	0	0	\$0	\$0	\$0	
Speech & Language Therapy		2507		Encounter	0	0	\$0		\$0	0
Speech & Language Therapy		2508		Encounter	0	0	\$0	SO	\$0	0
Speech & Language Therapy		2526		Encounter	0	0		\$0	S0	0
Speech & Language Therapy		2610	***************************************	Encounter	0	0	\$0	S0	\$0	0
Psychological Testing PSYCH/PHYS		6101		Per Hour		2	\$0	S0	S0	
Psychological Testing by Technician		6102		Per Hour	- 0	0	\$175	\$175	\$87	2
Psychological Testing by Comp		6103	·	Per Hour	0		S0	50	\$0	0
Assessments-Other		6105		Encounter	0	0	50	S0	S0	0
Assessments-Other		5110		Encounter		0	\$0	50	S0	
Assessments-Other		6111		Encounter	0	0	S0	<u>\$0</u>	S0_	0
Neurobehavioral Status Exam (Children's Waiver)		6116			0	0	\$0		\$0	
Neuropsych test by Psych/Phys		5118		Per Hour	0	0	\$0	\$0	S0	0_
Neuropsych test by Tech		5119		Per Hour	0	0	S0	S0	\$0	0
Neuropsych test Admin w/Comp		5120		Per Hour	0	0		S0	\$0	0
Physical Therapy		7001		Per Hour	0	0	S0	S0	S0	0
Physical Therapy				Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		7002		Encounter	0	0	S0	\$0	S0	0
		7003		Encounter	0	0		50	S0	0
Occupational Therapy		7004		Encounter	0	0	S0	\$0	S0	0
Occupational or Physical Therapy		7110		15 Minutes	0		S0	S0	S0_	0
Occupational or Physical Therapy	~	7112		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy	***************************************	7113		15 Minutes	0	0	S0	S0	\$0	0
Occupational or Physical Therapy		7116		15 Minutes	0	0	S0	S0	\$0	0
Occupational or Physical Therapy	***************************************	7124		15 Minutes	0	0	S0	S0	SO	0
Occupational or Physical Therapy		7140		15 Minutes	0	0	\$0	S0	\$0	0
Occupational or Physical Therapy		7150		Encounter	0	0	\$0	S0	\$0	0
Occupational or Physical Therapy		7530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		7532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		7533		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy		7535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		7537		15 Minutes	0	0	\$0		\$0	0
Occupational or Physical Therapy		7542	<del></del>	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		7703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		7750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy	9	7755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		7760		15 Minutes	0	0	\$0	S0	\$0	0
C/O for Orthotic/Prosth Use	9	7762			0	0	\$0	\$0	\$0	0
Assessment or Health Services	9	7802		15 Minutes	1	4	\$533	\$533	\$133	4
Assessment or Health Services	9	7803		15 Minutes	0	0	\$0	SO	\$0	0
Health Services	9	7804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	9	9201		Encounter	0	0	\$0	S0	\$0	0
Additional Codes-Physician Services	9	9202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	9	9203		Encounter	0	0	S0	\$0	SO	0
Additional Codes-Physician Services	9	9204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	9	9205		Encounter	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services	9	9211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	9	9212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	9	9213		Encounter	0	0	\$0	\$0	\$0	0
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Childs Cost Data by Service Category			Addits with	wientai inness		Fiscal Year	2006-2007		State of	Michigan
Gratiot	D 0.1	uanaa a .		Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	S0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	S0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	SO	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	SO			0
Additional Codes-Physician Services		99241		Encounter	0	0	S0			
Additional Codes-Physician Services		99242		Encounter	0	0	SO		S0	0
Additional Codes-Physician Services		99243		Encounter	0	0	S0			
Additional Codes-Physician Services		99244		Encounter	0	0	S0	S0	S0	
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services		99251		Encounter	0	0	S0		S0	
Additional Codes-Physician Services		99252	_	Encounter	0	0		\$0	S0 S0	0
Additional Codes-Physician Services		99253		Encounter	0	0				
Additional Codes-Physician Services		99254		Encounter	0	0			S0 S0	
Additional Codes-Physician Services		99255		Encounter	0		50			0
Additional Codes-Physician Services		99261		Encounter	0	0	S0		S0	0
Additional Codes-Physician Services		99262		Encounter	0	0		S0		0
Additional Codes-Physician Services		99263		Encounter	0	0			\$0	0
Additional Codes-Physician Services		99271		Encounter	0	0		S0	S0	0
Additional Codes-Physician Services	<del></del>	99272		Encounter	0	0		S0	S0	0
Additional Codes-Physician Services		99273		Encounter		0	S0	S0	S0	0
Additional Codes-Physician Services		99274		Encounter	0	0	\$0 \$0	S0	\$0	0
Additional Codes-Physician Services		99275		Encounter		0	\$0		S0	
Medication Administration		99506		Encounter	- 0	0	\$0 \$0	\$0 \$0		0
Transportation		A0080		Per mile	0	0			S0	
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation	V WYV 77 444 4	A0100		Per one-way trip	0	0	S0	S0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0		SO	0
Transportation		A0120		r er one-way trip	0		\$0	\$0	S0	0
Transportation		A0130			- 0	0	\$0	\$0	S0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile			\$0	\$0	\$0	0
Transportation				Per Mile	0	0	\$0	\$0	\$0	0
		A0170		D 1/3	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	, -	A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	SO	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical	·	D0220			0	0	50	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	S0	\$0	\$0	0
Prophylaxis Adult		D1110			0	, 0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0		\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

Gratiot						110441 1041	2000 2007		0	gun
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210		······································	0	0	\$0	\$0		0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	S0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0		\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0 S0	\$0	S0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0		
Assessment		H0002		Encounter	162	181	\$41,614	\$257	\$230	
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	341,614 S0			<u></u>
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	S0	\$0 \$0	\$0 \$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	S0	\$0	So	0
Substance Abuse: Case Management	,	H0006			0	0	50			
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0 \$0	S0 50	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0		\$0	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days			\$0 \$0	\$0	S0 S0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0 \$0	\$0 \$0	0
Crisis Residential Services	<u> </u>	H0018		Days	0	0	S0	S0	S0	
Substance Abuse: Residential	1002	H0018		Days	0	0	S0		S0	
Substance Abuse: Residential	1002	H0019		Days	0	0	S0	S0	S0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	S0	S0	S0	
Substance Abuse: Early Intervention		H0022		Encounter	0	0		S0	S0	
Peer Directed and Operated Support Services		H0023		Encounter	0	0	S0		S0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	S0	\$0	S0	0
Assessment		H0031		Encounter	203	221	\$55,970	\$276	\$253	1
Substance Abuse: Assessment		H0031	•	Encounter	0	0	\$0	\$0	S0	0
Treatment Planning	<del> </del>	H0032		Encounter	39	40	\$5,084	\$130	\$127	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$5,004	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	SO SO	\$0	\$0	0
Home Based Services		H0036		15 Minutes	38	1,954	\$97,446	\$2,564	\$50	51
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA NA	<del></del>	15 minutes	0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)	****	H0039		15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0 \$0	\$0	\$0	0
				<del></del>						
Behavior Management Review		H2000		Encounter	0	0	\$0 \$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes			\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	87	399	\$42,928	\$493	\$108	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015	<u> </u>	15 Minutes	7	7,554	\$38,374	\$5,482	\$5	1,079
Community Living Supports (Daily)		H2016		Per Diem		9	\$790	\$790	\$88	9
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0		0
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	. 0
Behavior Services		H2019		15 Minutes	0	0	S0	\$0	\$0	
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	S0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	10	295	\$1,909	\$191	\$6	30
Mental Health Therapy		H2027		15 Minutes	. 0	0	\$0	\$0	SO SO	0

Gratiot				***						
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	29	25,725	\$115,248	\$3,974	\$4	887
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	S0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	
Transportation		S0209	•	Per Mile	0	0	\$0	\$0	\$0	
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	SO	\$0	\$0	
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	
Foster Care		S5140	\	Days	0	0	SO	So So		
Foster Care		S5145		Days	0	0	So	\$0	S0	
Respite		S5150		15 Minutes	0	0	S0	S0		
Respite		S5151		Per Diem	0	0	SO		S0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	S0	S0		0
Personal Emergency Response System (PERS)		S5161		Month	0	0	S0	S0		
Environmental Modification		S5165		Service	0	- 0	S0	S0	50	0
Enhanced Medical Equipment-Supplies		S5199		Items		0	S0	\$0 \$0	\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0		SO SO	S0	0
Health Services		S9445		Encounter	0	0	S0		S0	0
Health Services		S9446	-	Encounter	2	34		S0	S0	0
Health Services		S9470	<del></del>	Encounter	0	0	\$5,269 \$0	\$2,634	\$155	17
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0		<u>\$0</u>	S0	0
Reidential Room and Board		S9976		Days	0	0		\$0	SO_	0
Assessment		T1001		Encounter	9	9		\$0	S0	
Health Services		T1001	******	Up to 15 min	173	1,511	\$1,199	\$133	\$133	1
Respite Care		T1005		15 Minutes	0	0	\$110,832	\$641	<u>\$73</u>	9
Respite Care		T1005	TD	15 Minutes	0	0	\$0 \$0	\$0 50	\$0	
Respite Care	-	T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012	16	Encounter	0 -	0	\$0	\$0	\$0	0
Family Psycho-Education		T1012		Encounter	0	0	\$0	\$0	S0	
Supports Coordination/Wrap Facilitation		T1015		15 minutes	3	37		\$0	\$0 \$93	0
Targeted Case Management		T1017		15 minutes	212	6,993	\$3,425 \$275,594	\$1,142	\$93 \$39	12
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	212	67	\$2,640	\$1,300	\$39	33
Personal Care in Licensed Specialized Residential Setting		T1020		Days	1	9		\$120		3
Personal Care in Licensed Specialized Residential Setting	0.00	T1020	TF	Days	0	0	\$667	\$667 \$0	\$74	9
		T1020	TG		0	0	\$0		\$0	0
Personal Care in Licensed Specialized Residential Setting		T1023	10	Days	32	35	\$0	\$0	\$0	0
Assessments Enhanced Medical Supplies or Pharmacy				Encounter	0		\$22,798	\$712	\$651	1
		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001		n n:	0		\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0		\$0	\$0	0
Transportation		T2003		Encounter / Trip	·····	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005	<del> </del>		0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	S0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037	<u> </u>	Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category			Adults with M	Mental Illness		Fiscal Yea	ır 2006-2007		State of	State of Michigan		
Gratiot Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case		
Total Population and Cost					592		\$1,565,316					

CMHSP Cost Data by Service Category			Adults with N	Mental Illness		Fiscal Yea	r 2006-2007		State of	Michigan
Hiawatha				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	7	1,118	\$256,231	\$36,604	S229	160
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	63	563	\$365,430	\$5,800	\$649	9
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		-	Days	0	0	\$0	SO	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	S0	\$0		0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	S0	SO	SO	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	S0	S0	SO	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	S0	SO	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0	so	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	SO	S0	
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0		S0	SO SO	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	\$0	So	SO	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	S0	SO	SO	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0		\$0	S0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	S0		SO SO	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	S0	SO	S0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	So	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	SO	SO	\$0	0
ECT Recovery Room	0710				0	0	SO	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	S0	\$0	SO	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	S0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	SO	S0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		# of visits	0	0	\$0	\$0	S0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	56	497	\$74,595	\$1,332	\$150	9
Assessment-Psychiatric Assessment		90801		Encounter	96	103	\$98,190	\$1,023	\$953	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	S0	\$0	S0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	S0	\$0	S0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Theren, Individual Therens	· · · · · · · · · · · · · · · · · · ·	00906		Engagetes 45 60 Min	211	1 262	£294 107	C1 247	5226	-

Therapy-Individual Therapy

Michigan Department of Community Health

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Encounter 45-50 Min

1,262

211

\$284,197

\$1,347

\$225

6

90806

Hiawatha						r iocar i car	2000 2007		State of	Michigan
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0		0
Therapy-Individual Therapy	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	SO SO	50	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	S0			
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	S0			
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	50	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	S0	\$0	. 0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	S0	SO	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	S0	SO	SO	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	S0	so	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	SO	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	S0	SO	\$0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	S0	50	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0_	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	3	7	\$2,473	\$824	\$353	2
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	89	1,027	\$238,647	\$2,681	\$232	12
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	SO	SO	0
Medication Review		90862		Encounter	403	1,784	\$606,683	\$1,505	\$340	4

Hiawatha				Unit						Ü
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	1	54	\$17,847	\$17,847	\$331	54
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	
Speech & Language Therapy		92507		Encounter	3	7	\$2,040	\$680	\$291	2
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	S0		- 0
Speech & Language Therapy		92610		Encounter	0	0	\$0		\$0 \$0	
Psychological Testing PSYCH/PHYS		96101		Per Hour	1	3	\$3,173	\$3,173		0
Psychological Testing by Technician		96102		Per Hour	0	0	\$3,173	\$0	\$1,058 \$0	3
Psychological Testing by Comp		96103		Per Hour	0	0		\$0 \$0		0
Assessments-Other		96105	-	Encounter	0	0		S0	S0	0
Assessments-Other		96110		Encounter	0	0	S0	S0	S0	
Assessments-Other		96111		Encounter	0			S0	S0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0			\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	S0	S0 50	<u>\$0</u>	
Neuropsych test by Tech		96119		Per Hour	0		S0	S0	\$0	
Neuropsych test Admin w/Comp		96120		Per Hour	0		S0	\$0	S0	0
Physical Therapy		97001		Encounter	1	0	\$0	\$0	S0	0
Physical Therapy		97002		Encounter	0	I	\$680	\$680	S680	1
Occupational Therapy		97003			0	0	\$0	\$0	SO	0
Occupational Therapy		97004		Encounter Encounter	0	0		S0_	S0	
Occupational or Physical Therapy		97110		15 Minutes	1	0	\$0	S0	S0	0
Occupational or Physical Therapy		97112			<u> </u>	3	\$181	\$181	\$60	3
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	S0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	S0		0
Occupational of Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	S0	0
Occupational of Physical Therapy				15 Minutes	0	0	S0	\$0	S0	0
		97150		Encounter	0		S0	\$0	S0	0
Occupational or Physical Therapy Occupational or Physical Therapy		97530 97532	-	15 Minutes	0	0	S0	\$0		0
		******		15 Minutes	0	0	\$0	S0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0		0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0 <u> </u>	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	. 0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	S0		0
Assessment or Health Services		97802		15 Minutes	0		\$0	S0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	S0	\$0	0
Health Services		97804	<del></del>	30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	S0	0

Hiawatha				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0		0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	50	0
Additional Codes-Physician Services		99222			0	0	SO	\$0	so	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	SO	
Additional Codes-Physician Services		99232			0	0	SO	\$0	S0	
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99241		Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services		99242		Encounter	0	0	S0	\$0	So	
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99244		Encounter	0	0	SO	S0	S0	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services		99252		Encounter	0	0	SO SO			0
Additional Codes-Physician Services		99253		Encounter	0	0		\$0	S0	
Additional Codes-Physician Services		99254	*****	Encounter	0	0	S0	50		0
Additional Codes-Physician Services		99255		Encounter	0	0		S0	So	
Additional Codes-Physician Services		99261		Encounter	0	0			S0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	SO		0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	\$0	S0	
Additional Codes-Physician Services		99271		Encounter	0	0	\$0	\$0	SO SO	
Additional Codes-Physician Services		99272		Encounter	0	0	S0	\$0	S0	0
Additional Codes-Physician Services		99273	*	Encounter	0	0	\$0	\$0	SO SO	0
Additional Codes-Physician Services		99274	-	Encounter	0	0	\$0	SO	\$0	
Additional Codes-Physician Services		99275		Encounter	0	0		\$0		0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	SO	SO	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	S0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170				0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	S0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	S0	0
Resin based comp-one surface, ant	·	D2330			0	0	\$0	\$0	S0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	S0	0

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Hiawatha Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	So	\$0	\$0	
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0 \$0	
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0		\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0 \$0	\$0 \$0	0
Enhanced Medical Equipment-Supplies		E1399		Items		0	\$0	\$0 \$0	\$0	
Family Training/Support EBP only		G0177		Encounter	17	50	\$19,954	\$1,174	\$399	0
Substance Abuse: Individual Assessment		H0001		Encounter	0					3
Assessment		H0002		Encounter	12	13	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$3,512	\$293	\$270	<u>I</u>
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	H0004		15 Minutes	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Substance Abuse: Outpatient Treatment	0916, 0919 0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	SO	S0	S0	0
Substance Abuse: Case Management	0916, 0919									
Substance Abuse: Case Management Substance Abuse: Sub-Acute Detoxification	1002	H0006			0	0	S0	\$0	S0	0
Substance Abuse: Sub-Acute Detoxification Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0		\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	.0	0	S0	\$0	\$0	0
	1002	H0014		Days	0	0	S0	\$0	\$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	S0	0
Crisis Residential Services		H0018		Days	0	0	\$0	S0	\$0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	S0	S0	SO	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	S0	S0	0
Substance Abuse: Methadone		H0020		Encounter	0	0	S0	S0	\$0	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	SO	S0	S0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	SO	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	S0	\$0	S0	0
Assessment		H0031		Encounter	127	137	\$90,097	\$709	\$658	
Substance Abuse: Assessment		H0031		Encounter	0	0	S0	\$0	\$0	0
Treatment Planning		H0032		Encounter	33	34	\$7,131	\$216	\$210	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	S0	\$0	\$0	0
Health Services		H0034	-	15 Minutes	9	17	\$2,196	\$244	\$129	2
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	SO	
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	S0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	49	1,914	\$20,590	\$420	\$11	39
Peer Directed and Operated Support Services		NA			0	0	\$117,067	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	104	9,802	\$522,359	\$5,023	\$53	94
Community Living Supports in Independent living/own home		H0043		Per diem	1	336	\$29,346	\$29,346	\$87	336
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	9	12	\$5,820	\$647	\$485	
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0 \$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	371	3,532	\$219,388	\$591	\$62	10
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	102	47,860	\$190,116	\$1,864	\$4	469
Community Living Supports (15 Minutes)	·	H2015		15 Minutes	47	5,797	\$73,897	\$1,572	\$13	123
Community Living Supports (15 trimutes)  Community Living Supports (Daily)		H2016		Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)		H2016	TF	Per Diem	1	242	\$9,230	\$9,230	\$38	242
Community Living Supports (Daily)		H2016	TG	Per Diem	15	3,586	\$545,022	\$36,335	\$152	239
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$132	0
Wraparound		H2019		15 Minutes	0	0		\$0 \$0	\$0	0
Wraparound		H2021		Days	0	0	\$0	\$0	\$0	
Supported Employment Services		H2023		15 minutes	26	6,686	\$44,115	\$1,697	\$7	257
Mental Health Therapy		H2023		15 Minutes	0	0,080	\$44,115	\$1,697	\$7	0
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Fiscal Year 2006-2007

Hiawatha				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs	***************************************	H2030		15 Minutes	1	1,519	\$24,459	\$24,459	\$16	1,519
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	236	557	\$71,050	\$301	\$128	
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	\$0	SO	50	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	
Foster Care		S5140		Days	0	0	S0	SO	\$0	0
Foster Care		S5145		Days	0	0	\$0	SO		
Respite		S5150		15 Minutes	0	0	\$0	S0		
Respite		S5151		Per Diem	0	0	S0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	SO		
Personal Emergency Response System (PERS)		S5161		Month	0	0	S0	\$0	S0	
Environmental Modification		S5165		Service	0	0	S0	S0	S0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	S0	SO	\$0	
Occupational or Physical Therapy		S8990		Encounter	0	0	SO	S0	SO	
Health Services		S9445		Encounter	0	0	\$0	SO	SO	0
Health Services		S9446		Encounter	0	0	SO	\$0		
Health Services		S9470	11 100	Encounter	0	0	\$0	\$0	SO	
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	32	732	\$66,412	\$2,075	\$91	23
Reidential Room and Board		S9976		Days	0	0	\$0	\$0	SO	0
Assessment		T1001		Encounter	11	13	\$4,672	\$425	\$359	1
Health Services		T1002		Up to 15 min	17	4,152	\$43,238	\$2,543	\$10	244
Respite Care		T1005		15 Minutes	21	6,748	\$57,666	\$2,746	\$9	321
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	SO	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	SO	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	S0	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	254	2,577	\$199,752	\$786	\$78	10
Targeted Case Management		T1017		15 minutes	195	5,299	\$362,088	\$1,857	\$68	27
Nursing Home Mental Health Monitoring	***	T1017	SE	15 minutes	0	0	\$0	\$0	S0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	16	3,732	\$30,989	\$1,937	\$8	233
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	<u> </u>	91	\$1,290	\$1,290	\$14	91
Assessments		T1023		Encounter	229	286	\$125,154	\$547	\$438	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	5	15	\$222	\$44	\$15	3
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	S0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0_
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	00	SO	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					38	0	\$183,844	\$4,838	\$0	
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	S0	\$0	<u>\$0</u>	0

CMHSP Cost Data by Service Category	1		Adults with M	Iental Illness		Fiscal Yea	r 2006-2007		State of Michigan		
Hiawatha Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
Total Population and Cost					955		\$5,021,044	7,1			

CMHSP Cost Data by Service Category			Adults with M	Iental Illness		Fiscal Year	2006-2007		State of	Michigan
Huron				Unit						_
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1	82	\$30,143	\$30,143	\$368	82
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	2	18	\$12,240	\$6,120	\$680	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	41	226	\$146,540	\$3,574	\$648	6
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	SO	SO	S0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	SO	S0	S0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272	1		# of items	0	0	\$0	SO	S0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	SO	\$0	\$0	0
ECT Anesthesia	0370				0	0	\$0	\$0		0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	S0	\$0	\$0	
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	\$0	\$0	\$0	
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	SO	\$0	50	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	SO	SO	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	S0	SO	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472		.,	# of tests	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	S0	\$0	SO	0
ECT Recovery Room	0710				0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	SO	0
Crisis Observation Care	0762			Hour	0	0	S0	\$0	S0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	S0	0
Outpatient Partial Hospitalization	0912			Days	0	0	S0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	SO SO	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	SO	0
Additional Codes-ECT Anesthesia	and the second s	00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration	-	90772		Encounter	20	164	\$2,684	\$134	\$16	8
Assessment-Psychiatric Assessment		90801		Encounter	93	101	\$25,391	\$273	\$251	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	18	22	\$2,024	\$112	\$92	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	50	0
Therapy-Individual Therapy	· · · · · · · · · · · · · · · · · · ·	90806		Encounter 45-50 Min	199	992	\$171,731	\$863	\$173	5

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State of Michigan

Huron				Unit						Ü
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	· · · · · · · · · · · · · · · · · · ·	90807	***	Encounter 45-50 Min	0	0	\$0	\$0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy		90808		Encounter 75-80 Min	26	41	\$7,607	\$293	\$186	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	S0	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809	<del>.</del>	Encounter 75-80 Min	0	0	\$0	\$0	S0	
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0				
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	S0	50	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	\$0	\$0		
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	SO		SO	0
Therapy-Individual Therapy	,	90812		Encounter 45-50 Min	0	0	SO	So	So	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	S0	S0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	SO	50	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	SO	S0	S0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	SO	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	SO	\$0	50	0
Therapy-Individual Therapy	11 343.00	90815		Encounter 75-80 Min	0	0	SO			0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	SO	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	S0	S0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90818	******	Encounter 45-50 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	S0	\$0		0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	_	90824		Encounter 20-30 Min	0	0	S0	\$0	\$0	00
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 45-50 Min Encounter 75-80 Min	0	0	\$0 \$0	\$0 \$0	\$0	0 0
Therapy-Individual Therapy Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0 \$0	\$0	\$0 \$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0 \$0	\$0		0
Therapy-Family Therapy		90847		Encounter	4	11	\$1,128	\$282	\$103	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	V210, V212	90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	So	0
Therapy-Group Therapy		90853		Encounter	31	152	\$6,466	\$209	\$43	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	S0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	102	183	\$13,186	\$129	\$72	2

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0310, 0313	90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other	Trem.	90887		Encounter	0	0	\$0		\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	S0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy	· · · = · · · ·	92508		Encounter	0		S0	\$0		0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	11	62	\$15,900	\$1,445	\$256	6
Psychological Testing by Technician		96102		Per Hour	0	0	\$15,500	\$0	50 S0	
Psychological Testing by Comp		96103		Per Hour	0	0	\$0 \$0			0
Assessments-Other		96105		Encounter	0	0	\$0			
Assessments-Other		96110		Encounter	0	0	\$0 \$0	\$0 \$0		0
Assessments-Other		96111		Encounter	0	0	S0			0
Neurobehavioral Status Exam (Children's Waiver)	111100	96116		Per Hour	0	0				0
Neuropsych test by Psych/Phys		96118		Per Hour	0					0
Neuropsych test by Tech		96119		Per Hour	0	0		S0		0
Neuropsych test Admin w/Comp		96120		Per Hour	0					0
Physical Therapy		97001		Encounter	0	0			S0 S0	0
Physical Therapy		97002		Encounter	0	0				0
Occupational Therapy		97003		Encounter	1		\$235	S235	S235	
Occupational Therapy		97004		Encounter		0	\$233 \$0		\$233 \$0	
Occupational or Physical Therapy		97110		15 Minutes	0	0	S0	\$0 \$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0		\$0	\$0 \$0	
Occupational or Physical Therapy		97113		15 Minutes	0	0		- S0	S0	0
Occupational or Physical Therapy		97116		15 Minutes	0		\$0	S0	\$0	
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0 \$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0			S0	0
Occupational or Physical Therapy		97150		Encounter	0	- 0	\$0		\$0 \$0	0
Occupational or Physical Therapy		97530		15 Minutes	1	3	\$187	\$187	\$62	3
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0		0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	SO	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	. 0	0	\$0	\$0	\$0	
Health Services		97804		30 Minutes	0	0	S0	\$0	\$0	
Additional Codes-Physician Services		99201		Encounter	0	- 0	\$0 S0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	- 0	\$0 \$0	\$0		0
Additional Codes-Physician Services		99203		Encounter	0	0	SO SO	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	. 0	\$0 \$0	\$0		0
Additional Codes-Physician Services		99205		Encounter	40	40	\$20,513	\$513	\$513	1
Additional Codes-Physician Services		99211		Encounter	0	0	\$20,515	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0			\$0 \$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	S0	\$0 \$0	0
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Huron				Unit						C
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	270	1,054	\$220,702	\$817	\$209	4
Additional Codes-Physician Services		99215		Encounter	67	77	\$26,690	\$398	\$347	<u>i</u> _
Additional Codes-Physician Services		99221			8	9	\$605	\$76	\$67	1
Additional Codes-Physician Services		99222			31	33	\$4,204	\$136	\$127	<u> </u>
Additional Codes-Physician Services		99223			1	1	\$160	\$160	\$160	<u> </u>
Additional Codes-Physician Services		99231			40	169	\$6,167	\$154	\$36	4
Additional Codes-Physician Services		99232			16	28	\$630	\$39	\$23	2
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99238		30 Minutes or less	22	24	\$981	\$45	S41	
Additional Codes-Physician Services		99241		Encounter	0	0	SO	So	\$0	0
Additional Codes-Physician Services		99242		Encounter	0	0	S0	\$0 S0	S0	
Additional Codes-Physician Services		99243		Encounter	0			so	S0	
Additional Codes-Physician Services		99244		Encounter	0	0	S0		S0	0
Additional Codes-Physician Services		99245	-/	Encounter	0	0	SO		S0	
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0		0
Additional Codes-Physician Services		99252		Encounter	0	0				
Additional Codes-Physician Services		99253		Encounter	0	0	\$0	S0		0
Additional Codes-Physician Services		99254		Encounter	0	0	S0	\$0 \$0		0
Additional Codes-Physician Services		99255		Encounter	0	0	\$0	S0	S0	
Additional Codes-Physician Services		99261		Encounter	0	0		\$0		0
Additional Codes-Physician Services	- 112 (112)	99262		Encounter	0	0		\$0 \$0	S0	
Additional Codes-Physician Services		99263		Encounter	0	0		\$0 \$0	\$0	
Additional Codes-Physician Services		99271		Encounter	0	0		\$0 S0	\$0 \$0	0
Additional Codes-Physician Services		99272		Encounter	0	0	\$0		S0	
Additional Codes-Physician Services		99273		Encounter	0	0		\$0	S0	
Additional Codes-Physician Services		99274		Encounter	0		SO	\$0	S0	
Additional Codes-Physician Services		99275		Encounter	0	0	S0	S0	\$0	
Medication Administration		99506		Encounter	0		SO	\$0	S0	
Transportation		A0080		Per mile	0	0	\$0	\$0		0
Transportation		A0090		Per mile	0	0	\$0	\$0		0
Transportation		A0100		Per one-way trip	0	0	SO SO	\$0	\$0	
Transportation		A0110		Per one-way trip	0	0	S0	so	\$0	
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0		\$0	\$0	0
Transportation		A0140		· · ·	0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	SO SO	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0		\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	S0	\$0	SO	0
Additional codes - Transportation		A0428			0	0	SO	\$0	so	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings	-	D0274		<del> </del>	0	0	\$0	\$0	\$0	
Prophylaxis Adult		D1110	· · ·		0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0		\$0	\$0 \$0	0
Resin based comp-two surfaces, ant		D2331			0	0	S0		\$0	
Resin based comp-three surfaces, an		D2331 D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2332 D2391			0	0	\$0 \$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2391 D2392			0	0	\$0	\$0	\$0	0
		D2392 D2393			- 0	0	\$0	\$0 \$0	\$0	0
Resin based comp-three surfaces, post		D(2)73				0	<b>⊅</b> U	20	<b>Φ</b> 0	

Huron						A ISOM TOM ZOOU-ZOOV		State of Whemgan		
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	
Peridontal, main	<del>-</del>	D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0		0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0		\$0	\$0	0
Assessment		H0002		Encounter	0	0		\$0	\$0	
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	S0		\$0 \$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	S0	\$0	50	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	\$0	So	SO	0
Substance Abuse: Case Management		H0006			0	0	SO	SO	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0 \$0	\$0	\$0 \$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0 \$0	\$0		0
Substance Abuse: Sub-Acute Detoxification	1002	H0014	· · · · · · · · · · · · · · · · · · ·	Days	0	0		\$0 \$0	\$0 \$0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	SO	S0	0
Crisis Residential Services		H0018		Days	67	861	\$574,981	\$8,582	\$668	13
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	So	0
Substance Abuse: Residential	1002	H0019		Days	0	0	S0	\$0	50	
Substance Abuse: Methadone		H0020		Encounter	0	0	S0	SO		
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	S0	50	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	S0		S0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	S0	\$0	\$0	
Assessment		H0031		Encounter	155	159	\$52,594	\$339	\$331	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	S0	0
Treatment Planning		H0032		Encounter	2	2	\$939	\$470	\$470	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	S0	
Health Services		H0034		15 Minutes	1	1	\$70	\$70	\$70	1
Home Based Services		H0036		15 Minutes	0	0	20	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	SO SO		0
Peer Directed and Operated Support Services		H0038		15 minutes	5	523	\$2,116	\$423	\$4	105
Peer Directed and Operated Support Services		NA		To minutes	0	0	\$91,096	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	60	12,746	\$881,919	\$14,699	\$69	212
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	1	3	\$317	\$317	\$106	3
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$100	0
Behavior Management Review		H2000		Encounter	2	6	\$623	\$311	\$104	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$023	\$0	\$104	0
		H2010		15 Minutes	202	1,394	\$105,528	\$522	\$0 \$76	7
Crisis Intervention		H2011 H2014		15 Minutes	35	9,256	\$105,528 \$177,053	\$5,059	\$19	264
Skill-Building and Out of Home Non Vocational Habilitation	<u> </u>									
Community Living Supports (15 Minutes)		H2015		15 Minutes	32	37,980	\$142,472	\$4,452	\$4	1,187
Community Living Supports (Daily)		H2016		Per Diem	4	1,201	\$20,888	\$5,222	\$17	300
Community Living Supports (Daily)		H2016	TF	Per Diem		145	\$5,116	\$5,116	\$35	145
Community Living Supports (Daily)		H2016	TG	Per Diem	0	0	\$0	\$0	\$0	0
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	. \$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	39	41,328	\$205,395	\$5,267	\$5	1,060
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0

#### Adults with Mental Illness

Fiscal	Year	2006	-2007

State of Michigan

Huron				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0		0
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	SO	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0	SO	SO	SO	0
Family Training		S5111		Encounter	0	0	\$0	\$0	SO	0
Foster Care		S5140		Days	0	0	S0	S0	SO	0
Foster Care		S5145		Days	0	0	\$0	S0	S0	
Respite		S5150		15 Minutes	0	0	\$0		50	
Respite		S5151		Per Diem	0	0	S0	\$0	S0	- ·
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	SO	\$0	50	
Personal Emergency Response System (PERS)		S5161		Month	0	0	SO	S0	S0	0
Environmental Modification		S5165		Service	0	0		\$0	\$0	
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	50	SO	SO	
Occupational or Physical Therapy		S8990		Encounter	0	0	S0	So	S0	0
Health Services		S9445		Encounter	0	0	\$0		S0	0
Health Services	_	S9446		Encounter	0	0	\$0	\$0	SO	0
Health Services		S9470		Encounter	0	0	\$0	SO	S0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	\$0	S0	\$0	0
Reidential Room and Board		S9976		Days	0	0	\$0	\$0	S0	0
Assessment		T1001		Encounter	1	1	\$235	\$235	S235	1
Health Services		T1002		Up to 15 min	1	66	\$1,598	\$1,598	\$24	66
Respite Care		T1005		15 Minutes	1	64	\$87	\$87	S1	64
Respite Care	_	T1005	TD	15 Minutes	0	0	S0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	SO	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education	_	T1015		Encounter	0	0	\$0	\$0	\$0	0
Supports Coordination/Wrap Facilitation	_	T1016		15 minutes	1	38	\$3,341	\$3,341	\$88	38
Targeted Case Management		T1017		15 minutes	166	6,513	\$353,407	\$2,129	\$54	39
Nursing Home Mental Health Monitoring	_	T1017	SE	15 minutes	30	938	\$50,543	\$1,685	\$54	31
Personal Care in Licensed Specialized Residential Setting		T1020		Days	4	1,346	\$3,791	\$948	\$3	337
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments	_	T1023		Encounter	116	187	\$64,754	\$558	\$346	2
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	02	\$0	\$0	0
Transportation		T2001	<u> </u>	-	0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	. 0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	S0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	S0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	8	0	\$3,000	\$375	\$0	0
Enhanced Medical Equipment-Supplies	-	T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					5	0	\$543	\$109	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			11	0	\$7,618	\$693	50	0

CMHSP Cost Data by Service Category		Adults with N	fental Illness		Fiscal Year 2006-2007					
Huron Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Total Population and Cost					698		\$3,466,138			

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	12	93	\$52,540	\$4,378	\$565	8
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT <b>7</b> 3	Days	54	502	\$283,605	\$5,252	\$565	9
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	S0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	SO	S0	S0	
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	SO	SO	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0		SO	S0	0
ECT Anesthesia	0370				0	0	\$0	S0	S0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	SO	SO	S0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	SO	S0	S0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	SO	\$0	S0	
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	S0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460	-		# of tests	0	0	SO	50	S0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	S0	SO	SO	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611		·	# of tests	0	0	\$0	\$0	So	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	S0	S0	SO	0
ECT Recovery Room	0710				0	0	SO	S0	S0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	S0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	SO	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	0	0	\$0	\$0	SO	0
Assessment-Psychiatric Assessment	4	90801		Encounter	261	283	\$146,982	\$563	\$519	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	S0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	79	121	\$4,308	\$55	\$36	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	564	3,726	\$239,418	\$424	\$64	7

Ionia				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806	***	Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90807		Encounter 45-50 Min	0	0	\$0	SO	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	So	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	32	43	\$4,411	\$138	\$103	1
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	SO	SO	S0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	S0	\$0	S0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	SO	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	SO	\$0	S0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	S0			
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0		S0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	S0	SO	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	SO	\$0	S0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	SO	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	SO	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	S0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min			\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	SO.	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826 90826		Encounter 45-50 Min Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy) Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0 \$0		\$0 \$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0		\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0		S0	0
Therapy-Family Therapy		90846		Encounter	1	<u></u>	\$72	\$72	\$72	
Therapy-Family Therapy		90847		Encounter	3	7	S475	\$158	\$68	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	SO	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	276	1,605	\$60,048	\$218	\$37	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	33	59	\$2,230	\$68	\$38	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review	·	90862		Encounter	380	1,726	\$293,225	\$772	\$170	5

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	SO	\$0	0
Additional Codes-ECT Physician	33,70, 03.13	90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	
Speech & Language Therapy		92507		Encounter	0					0
Speech & Language Therapy		92508		Encounter	0	0	\$0 \$0	\$0 \$0	\$0	0
Speech & Language Therapy		92526	7 9778.11	Encounter	0	0	S0			0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0		S0	\$0 \$0	S0	0
Psychological Testing by Technician	***	96102		Per Hour	0	0		<del>-</del>	\$0	
Psychological Testing by Comp		96103		Per Hour	0	0	S0 S0	\$0 \$0	\$0	0
Assessments-Other		96105		Encounter	0	0	S0		\$0	
Assessments-Other		96110		Encounter	0		S0	50	\$0	
Assessments-Other		96111		Encounter	0	0	S0 S0	\$0	50	0
Neurobehavioral Status Exam (Children's Waiver)		96116	<del></del>	Per Hour	0	0		\$0	\$0	0
Neuropsych test by Psych/Phys		96118		Per Hour	- 0	0	S0	\$0	S0	0
Neuropsych test by Tech		96119		Per Hour	0	0	S0	S0	S0	0
Neuropsych test Admin w/Comp		96120		Per Hour	0		\$0	SO SO	S0	0
Physical Therapy		97001				0	S0	\$0	S0	. 0
Physical Therapy		97001		Encounter	0	0	S0	\$0	S0	. 0
Occupational Therapy		97002		Encounter	0	0	\$0	\$0		0
Occupational Therapy		97003		Encounter	0	0	\$0	S0	S0	0
Occupational or Physical Therapy				Encounter	0	0	\$0	\$0	\$0	0
		97110		15 Minutes	0	0	\$0	SO	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	S0	S0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	S0	\$0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	S0	\$0	S0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	S0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	· · · · · · · · · · · · · · · · · · ·	99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212	====	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services	<del></del>	99215		Encounter	0	0	\$0		\$0	
Additional Codes-Physician Services	·	99221			0	0	\$0	so	\$0	
Additional Codes-Physician Services		99222			0	0	\$0	so	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	So	
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99233			0	0	\$0	SO	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	S0	\$0	SO	
Additional Codes-Physician Services		99241		Encounter	0	0	So	so		
Additional Codes-Physician Services		99242		Encounter	0	0	SO		S0	
Additional Codes-Physician Services		99243		Encounter	0	0	SO	So		
Additional Codes-Physician Services		99244		Encounter	0	0	SO		S0	
Additional Codes-Physician Services		99245		Encounter	0	0	S0			
Additional Codes-Physician Services		99251		Encounter	0	0	SO	so		0
Additional Codes-Physician Services		99252		Encounter	0	0			S0	
Additional Codes-Physician Services		99253		Encounter	0	0	SO SO	\$0	\$0	
Additional Codes-Physician Services		99254		Encounter	0	0			S0	
Additional Codes-Physician Services		99255		Encounter	0	0	So			0
Additional Codes-Physician Services		99261		Encounter	0	0		\$0	S0	
Additional Codes-Physician Services		99262		Encounter	0	0	SO		S0	0
Additional Codes-Physician Services		99263		Encounter	0	0	So			0
Additional Codes-Physician Services		99271		Encounter	0	0	SO	SO	50	0
Additional Codes-Physician Services	*	99272		Encounter	0	0	S0	\$0 S0	\$0	
Additional Codes-Physician Services		99273		Encounter	0	0		\$0	S0	
Additional Codes-Physician Services		99274		Encounter	0	0	S0	\$0 \$0	S0	
Additional Codes-Physician Services		99275		Encounter	0	0	S0	<u>so</u>	S0	
Medication Administration		99506		Encounter	8	46	\$14,718	\$1,840	\$320	6
Transportation		A0080		Per mile	0	0	\$0	\$0	\$520 \$0	0
Transportation		A0090		Per mile	0	0		\$0		
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	S0	
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	S0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	S0	<u>0</u>
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0		\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	
Additional Codes-Transportation		A0425	×	Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180	-	Encounter	0	0	\$0	S0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	
Prophylaxis Adult		D1110			0	0	\$0		\$0	
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	
Resin based comp-two surfaces, post		D2392			0	0	\$0	so		
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0
Joseph Mice Out Mood, poor	<del></del>	2,20,0					Ψ0	<b>4</b> 0		

CMHSP Cost Data by Service Category		Adults with Mental Illness			Fiscal Year 2006-2007				State of Michigan		
	Revenue Code	HCPCS Code	Modifier	Unit		**	_				
Service Category	nevenue code			Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0	
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0	
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0	
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0	
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0	
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0	
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	SO	0	
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	0	
Assessment	-	H0002		Encounter	57	69	\$13,903	\$244	\$201	1	
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0 	\$0	S0	0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	S0	\$0	\$0	0	
Substance Abuse: Case Management		H0006			0	0	\$0	SO	So	0	
Substance Abuse: Sub-Acute Detoxification	1002	H0010	-	Days	0	0	\$0	\$0	S0	0	
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	So	0	
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0	
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days		0	\$0	\$0	SO	0	
Crisis Residential Services		H0018		Days	17	61	\$15,927	\$937	\$261	4	
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	\$0	SO	0	
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	So	0	
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	\$0	SO	0	
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0	
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	SO	So	0	
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	S0	0	
Assessment		H0031		Encounter	603	623	\$53,508	\$89	\$86	I	
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	S0	0	
Treatment Planning		H0032		Encounter	525	579	\$38,623	\$74	\$67	1	
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0	
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0	
Home Based Services		H0036		15 Minutes	60	4,529	\$227,895	\$3,798	\$50	75	
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0	
Peer Directed and Operated Support Services		H0038		15 minutes	16	179	\$2,152	\$135	\$12	11	
Peer Directed and Operated Support Services		NA			0	0	\$76,612	\$0	\$0	0	
Assertive Community Treatment (ACT)		H0039		15 Minutes	31	5,892	\$687,305	\$22,171	\$117	190	
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0	
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0	
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0	
Behavior Management Review		H2000		Encounter	5	8	\$906	\$181	\$113	2	
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0	
Crisis Intervention		H2011		15 Minutes	272	2,092	\$145,468	\$535	\$70	8	
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	1	144	\$3,656	\$3,656	\$25	144	
Community Living Supports (15 Minutes)		H2015		15 Minutes	45	22,368	\$157,830	\$3,507	\$7	497	
Community Living Supports (Daily)		H2016		Per Diem	7	2,529	\$60,433	\$8,633	\$24	361	
Community Living Supports (Daily)		H2016	TF	Per Diem	2	730	\$34,125	\$17,062	\$47	365	
Community Living Supports (Daily)		H2016	TG	Per Diem	9	1,861	\$206,575	\$22,953	\$111	207	
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0	
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0	
Wraparound		H2022		Days	0	0	\$0	\$0	S0	0	
Supported Employment Services		H2023		15 minutes	129	2,503	\$67,045	\$520	\$27	19	
Mental Health Therapy	Lan Wilderson	H2027		15 Minutes	0	0	\$0	\$0	\$0	0	

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Ionia						110001 100	. 2000 2007		State 01	gan
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	0	0	\$0	\$0	\$0	
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	
Medication Review	***	M0064		Encounter Face-to-Face	63	324	\$48,610	\$772	\$150	5
Transportation		S0209		Per Mile	0	0	\$10,010	\$0		
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	0			S0	
Family Training		S5111		Encounter	9	42	\$9,026	\$1,003	\$215	5
Foster Care		S5140		Days	0	0	\$0	\$1,003		
Foster Care		S5145		Days	0	0	S0	S0	S0	0
Respite		S5150		15 Minutes	0	0		\$0		0
Respite		S5151		Per Diem	0	0	SO			0
Personal Emergency Response System (PERS)		\$5160		Encounter	0	0				
Personal Emergency Response System (PERS)		S5161		Month	0	0			\$0 \$0	
Environmental Modification		S5165		Service	0	0	S0			0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0			\$0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	S0		\$0 \$0	0
Health Services		S9445		Encounter	0	0	S0	\$0	\$0 \$0	0
Health Services		S9446		Encounter	0	0				0
Health Services	• •••	S9470		Encounter	0	0	S0			
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0		\$0		
Reidential Room and Board		\$9976		Days	0	0		\$0	S0	0
Assessment		T1001		Encounter		8	\$1,209	\$151	\$151	<u></u>
Health Services		T1002		Up to 15 min	15	408	\$37,019	\$2,468	\$91	
Respite Care		T1005		15 Minutes	3	836	\$3,418	\$1,139	S4	279
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	S0	\$0	SO SO	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	S0	\$0	S0	0
Family Psycho-Education		T1015		Encounter	0	0	\$0	\$0	SO SO	0
Supports Coordination/Wrap Facilitation		T1016		15 minutes	8	82	\$4,593	\$574	\$56	10
Targeted Case Management		T1017		15 minutes	547	18,198	\$1,019,282	\$1,863	S56	33
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	2	5	\$288	\$144	\$58	3
Personal Care in Licensed Specialized Residential Setting		T1020		Days	6	1,466	\$22,916	\$3,819	\$16	244
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	3	933	\$63,551	\$21,184	\$68	311
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	10	2,722	\$394,634	\$39,463	\$145	272
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	S0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	2	5	\$716	\$358	\$143	3
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	19	22	\$13,858	\$729	\$630	1
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other				· · · · ·	0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category		Adults with M	Mental Illness		Fiscal Yea	Fiscal Year 2006-2007			State of Michigan		
Ionia Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
Total Population and Cost					1,496		\$4,513,115				

0900, 0914, 0915,

0900, 0914, 0915,

0916, 0919

0916, 0919

90804

90805

90805

90806

Substance Abuse: Outpatient Treatment

Substance Abuse: Outpatient Treatment

Therapy-Individual Therapy

Therapy-Individual Therapy

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Encounter 20-30 Min

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 45-50 Min

0

0

0

603

0

0

0

6,762

\$0

\$0

\$0

\$429,899

\$0

\$0

\$0

S713

\$0

\$0

\$0

\$64

0

11

Kalamazoo						r ibeai reai	2000-2007		State of	
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0		
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy	0910, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	S0	\$0	SO	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	S0	S0	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0		S0	0
Therapy-Individual Therapy	***************************************	90811		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811	-	Encounter 20-30 Min	0	0	S0	\$0	S0	
Therapy-Individual Therapy		90812		Encounter 45-50 Min	8	58	\$6,160	\$770	\$106	7
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90813	***	Encounter 45-50 Min	0	0	S0	SO	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	S0	SO	so	
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	S0	So	So	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	SO	\$0	S0	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	SO	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	3	12	\$813	\$271	\$68	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847	100-100-100-100-100-100-100-100-100-100	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	81	1,102	\$26,339	\$325	\$24	14
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	so	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	1,599	5,346	\$647,904	\$405	\$121	3

Kalamazoo										· ·
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	······································	90870		Encounter	5	23	\$2,668	\$534	\$116	5
Assessments-Other		90887		Encounter	- 0	0	\$0	\$0	\$0	
Speech & Language Therapy		92506		Encounter	0	0	\$0	SO	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0		0
Speech & Language Therapy		92526		Encounter	0	0	SO	\$0	\$0	
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	19	52	\$12,576	S662	\$242	
Psychological Testing by Technician		96102		Per Hour	0	0	\$12,376	\$002 \$0	\$242 \$0	3
Psychological Testing by Comp		96103		Per Hour	0	0		S0		0
Assessments-Other		96105		Encounter	0	0				
Assessments-Other		96110		Encounter			<u>\$0</u>	<u>\$0</u>	S0	
Assessments-Other		96111	·	Encounter	- 0		50	\$0 60	\$0	
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0	<u>\$0</u>	. 50	0
Neuropsych test by Psych/Phys		96118			<del></del>	0	\$0	\$0	\$0	0
Neuropsych test by Tech				Per Hour	12	43	\$3,374	S281	S78	4
Neuropsych test Admin w/Comp		96119		Per Hour	0	0	\$0	S0		0
		96120		Per Hour	0	0	S0	\$0	S0	. 0
Physical Therapy		97001		Encounter			S0	<u>so_</u>	S0	0
Physical Therapy		97002		Encounter	0	0	S0	S0	S0	0
Occupational Therapy		97003		Encounter	0	0	S0	\$0	SO	0
Occupational Therapy		97004		Encounter	0	0	<u>\$0</u>	50	50	
Occupational or Physical Therapy		97110		15 Minutes	0	0	02	\$0	\$0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	SO	\$0	S0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	SO	S0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	50	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	<u>\$0</u>	S0	. 0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes		266	\$4,352	\$2,176	\$16	133
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	SO	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy	•	97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy	-10.00000000000000000000000000000000000	97755	•	15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	LL CHINE TO	99201		Encounter	0	0	\$0		\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0 \$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0		\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0 \$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	80		\$0 \$0	0
Additional Codes-Physician Services Additional Codes-Physician Services		99203			32	202	\$11,937	\$373	S59	
				Encounter			and the second s			6
Additional Codes-Physician Services		99212		Encounter	0	0	S0 50	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0		\$0	\$0	0

State of Michigan

Procession   Pro	Kalamazoo				Unit						
Millianne Cooke Projestes servers   9212   Servers   9212   Servers   9213   Servers   9214   Servers   9214   Servers   9215   Servers   92	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Cooker Propriets Services         9911         Enswert         3         0         56         50         93         0           Additional Cooker Programs Services         9922         8         1         1         15,000         171         366         1           Additional Cooker Programs Services         9322         1         1         15,000         150 <td>Additional Codes-Physician Services</td> <td></td> <td>99214</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>50</td> <td></td>	Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	50	
Mathematic Code Physicals Services   9721   31   36   51,00   581   1   1   1   1   1   1   1   1   1	Additional Codes-Physician Services		99215		Encounter	0	0				
Abbit molecule physician services 9221 66 17 54,00 57 568 17 Abbit molecule 1923 66 11 54,00 57 508 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 17 50 50 50 50 50 50 50 50 50 50 50 50 50	Additional Codes-Physician Services		99221								
Additional Cooker Projection Services 921 19, 13 1, 13, 13, 13, 13, 13, 13, 13, 13,	Additional Codes-Physician Services	•	99222								
Additional Confess Projection Services	Additional Codes-Physician Services		99223								
Additional Codes Physiman Services 9311 9312 9438 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9513 9510 9510 9510 9510 9510 9510 9510 9510	Additional Codes-Physician Services		99231								
Additional Codes Physicans Services 9318 10 Minutes or has 10 C 0 0 50 50 50 90 00 00 00 00 00 00 00 00 00 00 00 00	Additional Codes-Physician Services		99232			155					
Additional Codes Physician Services         59214         Disconstruct         0         50         50         50         50           Additional Codes Physician Services         59214         Exposurer         0         0         50         50         50         0           Additional Codes Physician Services         59214         Exposurer         0         0         50         50         50         0           Additional Codes Physician Services         59214         Exposurer         0         0         50	Additional Codes-Physician Services		99233								
Abble to Close Physician Services   9924   Benounter   0   0   50   50   50   50   50   50	Additional Codes-Physician Services		99238		30 Minutes or less	0					
Additional Colors Physician Services   \$9243   \$Benounter   0   0   50   50   50   50   50   50	Additional Codes-Physician Services		99241		Encounter	0	0				
Additional Code Physician Services 9914   Browner 0 0 0 5 9 9 9 9 0 0 0 0 0 0 0 0 0 0 0 0	Additional Codes-Physician Services		99242		Encounter		0				
Additional Codes Physicians Services	Additional Codes-Physician Services		99243		Encounter	0	0				
Additional Codes Physician Services         99251         Bosomation         0         50         50         50         0           Additional Codes Physician Services         99251         Bosomation         0         0         50         50         50         0           Additional Codes Physician Services         99251         Bosomation         1         1         1         1	Additional Codes-Physician Services		99244		Encounter						
Additional Codes Physicals services         99251         Bosoulter         0         9         9         9         9         0           Additional Codes Physicals Services         99253         Bosoulter         3         3         848         8116         5156         1           Additional Codes Physicals Services         99254         Bosoulter         1         1         5116	Additional Codes-Physician Services		99245		Encounter	0	0				
Addisend Code Physician Services 9923   Enousite 3	Additional Codes-Physician Services		99251		Encounter		0				
Meditional Codes Physician Services   99254   Bosousier   1   1   5116	Additional Codes-Physician Services		99252		Encounter		0				
Additional Code Physician Services   9235   Enounter   1   1   5116	Additional Codes-Physician Services		99253		Encounter						
Additional Codes Physicians Services 9251 Encounter 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Additional Codes-Physician Services		99254		Encounter		1				
Additional Codes Physicians Services 99261 Encounter 0 0 0 50 50 50 0 0 0 0 0 0 0 0 0 0 0 0	Additional Codes-Physician Services		99255			1		***			
Additional Code-Physician Services         9926         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99271         Broomter         0         0         50         50         50         0           Additional Code-Physician Services         99272         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99273         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99274         Bincounter         0         0         50         50         50         0           Additional Code-Physician Services         99275         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99275         Encounter         0         0         50         50         50         0           Additional Code-Physician Services         99275         Encounter         0         0         50         50         50         0           Additional Code-Partingorian Services         0         0         0         0	Additional Codes-Physician Services	,	99261		Encounter	0	0				
Additional Codes-Physicians Services         99281         Encounter         0         0         50         50         50         0           Additional Codes-Physicians Services         99271         Encounter         0         0         50         50         50         0           Additional Codes-Physicians Services         99273         Encounter         0         0         50         50         50         0           Additional Codes-Physicians Services         99274         Encounter         0         0         50         50         50         0           Additional Codes-Physicians Services         99274         Encounter         0         0         50         50         50         0           Additional Codes-Physicians Services         99275         Encounter         0         0         50         50         50         0           Additional Codes-Physicians Services         99275         Encounter         0         0         50         50         50         0           Additional Codes-Physicians Services         99275         Encounter         0         0         0         50         50         50         0           Transportation         ADD         Per mile         0 <td>Additional Codes-Physician Services</td> <td></td> <td>99262</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td></td> <td></td> <td></td> <td></td>	Additional Codes-Physician Services		99262		Encounter	0	0				
Additional Code-Physician Services 9271 Encounter 0 0 0 S0	Additional Codes-Physician Services	,	99263		Encounter	0	0				
Additional Codes-Physician Services 99273 Encounter 0 0 0 50 50 50 50 0 0 0 0 0 0 0 0 0 0	Additional Codes-Physician Services	****	99271		Encounter	0					
Additional Codes-Physician Services         99273         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99275         Encounter         0         0         50         50         50         0           Additional Codes-Physician Services         99276         Encounter         0         0         50         50         50         0           Medication Admisistration         40808         Per mile         0         0         50         50         50         0           Transportation         A0080         Per mile         0         0         50         50         50         0           Transportation         A0100         Per one-way trip         0         0         50	Additional Codes-Physician Services	,	99272		Encounter	0	0				
Additional Codes-Physician Services         99274         Encounter         0         0         S0         50         50         0           Additional Codes-Physician Services         99256         Encounter         0         0         S0         S0         S0         0           Transportation         A0080         Per mile         0         0         S0         S0         S0         0           Transportation         A0100         Per mile         0         0         S0         S0         S0         0         0           Transportation         A0100         Per one-way trip         0         0         S0         S0         S0         0         0           Transportation         A0110         Per one-way trip         0         0         S0         S0         S0         S0         0         0           Transportation         A0120         Per one-way trip         0         0         S0         <	Additional Codes-Physician Services		99273		Encounter	0	0	\$0	\$0		
Additional Codes-Physicians Services         59275         Encounter         0         0         SO         SO         SO         O           Medication Authoritistration         99506         Encounter         0         0         SO         SO         SO         O           Transportation         A0080         Per mille         0         0         SO         SO         SO         O           Transportation         A0100         Per one-way trip         0         0         SO         SO         SO         SO         O           Transportation         A0110         Per one-way trip         0         0         SO         S	Additional Codes-Physician Services		99274		Encounter	0	0	\$0			
Medication Administration   99506   Encounter   0   0   50   50   50   0   0   1   1   1   1   1   1   1	Additional Codes-Physician Services		99275		Encounter	0	0				
Permite   A0000	Medication Administration		99506		Encounter	0	0	S0	S0	\$0	
Transportation	Transportation		A0080		Per mile	0	0	S0	\$0	S0	
Pernangontation   A0110   Pernan-way triph   O   O   SO   SO   SO   SO   O   O   O	Transportation		A0090		Per mile	0	0	S0	\$0	\$0	
Transportation	Transportation		A0100		Per one-way trip	0	0	S0	\$0	\$0	
Parasportation	Transportation		A0110		Per one-way trip	0	0	S0	\$0	S0	0
Transportation	Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation	Transportation		A0130			8	8	\$112	\$14	\$14	1
Transportation	Transportation		A0140			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation         A0425         Per Mile         1         46         \$169         \$169         \$4         46           Additional Codes-Transportation         A0427         Refer to code descriptions.         0         0         50         \$0	Transportation		A0160		Per Mile	8	330	\$320	\$40	\$1	41
Additional Codes-Transportation         A0427         Refer to code descriptions.         0         0         \$0	Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional codes - Transportation         A0428         0         0         50         50         50         0           General dental services         D0150         0         0         0         50         50         50         0           Comp periodontal evaluation         D0180         Encounter         0         0         50         50         50         50         0           Intraoral periapical         D0220         0         0         50         50         50         50         50         0           Bitewings         D0230         0         0         0         50         50         50         50         0           Prophylaxis Adult         D1110         0         0         0         50         50         50         0         0           Resin based comp-one surface, and         D2331         0         0         0         50         50         50         0         0           Resin based comp-one surface, and         D2341         0         0         0         50         50         50         0         0           Resin based comp-one surface, post         D2391         0         0         0         50         5	Additional Codes-Transportation		A0425		Per Mile	1	46	\$169	\$169	\$4	46
General dental services         D0150         0         0         \$	Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Comp periodontal evaluation         D0180         Encounter         0         0         S0         \$0	Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
Intraoral periapical         D0220         0         0         \$0 </td <td>General dental services</td> <td></td> <td>D0150</td> <td></td> <td></td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	General dental services		D0150			0	0	\$0	\$0	\$0	0
Intraoral periapical         D0230         0         0         \$0 </td <td>Comp periodontal evaluation</td> <td></td> <td>D0180</td> <td></td> <td>Encounter</td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Bitewings         D0274         0         0         \$0	Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Prophylaxis Adult         D1110         0         0         \$0	Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant         D2330         0         0         50         \$0	Bitewings		D0274			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant         D2331         0         0         S0         \$0         \$0         0           Resin based comp-three surfaces, an         D2332         0         0         \$0 <t< td=""><td>Prophylaxis Adult</td><td></td><td>D1110</td><td></td><td></td><td>0</td><td>0</td><td>\$0</td><td>SO</td><td>\$0</td><td>0</td></t<>	Prophylaxis Adult		D1110			0	0	\$0	SO	\$0	0
Resin based comp-three surfaces, an         D2332         0         0         S0         S0         S0         0           Resin based comp-one surface, post         D2391         0         0         S0         S0         S0         0         0           Resin based comp-two surfaces, post         D2392         0         0         S0         S0         S0         50         0	Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post         D2391         0         0         S0         S0         S0         S0         0           Resin based comp-two surfaces, post         D2392         0         0         0         S0         S0         S0         S0         0	Resin based comp-two surfaces, ant					0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post         D2392         0         0         SO         SO         SO         SO         O	- manufacture and a second and a			***		0				\$0	0
	Resin based comp-one surface, post					0	0			\$0	0
Resin based comp-three surfaces, post D2393 0 0 S0 S0 S0 0	Resin based comp-two surfaces, post					0	0		\$0	\$0	0
	Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

Kalamazoo										•
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant	** '	D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0		0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0 \$0	\$0 \$0	0
Family Training/Support EBP only		G0177		Encounter	0	0		\$0	\$0	0
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0 \$0	\$0	\$0 \$0	0
Assessment		H0002		Encounter	4	4	\$2,350			
Substance Abuse: Individual Assessment		H0002		Encounter	0	0		\$588	\$588	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0 \$0	\$0 \$0	\$0 \$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	SO	\$0	\$0	0
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	S0	
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days		0			\$0 \$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	S0	\$0	\$0 \$0	
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	S0 S0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015	***	Days	0	0	\$0	\$0	S0	0
Crisis Residential Services		H0018	***	Days	282	3,423	\$844,740	\$2,996	\$247	12
Substance Abuse: Residential	1002	H0018		Days	0	0	\$0	S0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	SO SO	
Substance Abuse: Methadone		H0020		Encounter	0	0	\$0	SO SO	\$0	
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0		SO SO	
Peer Directed and Operated Support Services		H0023		Encounter	0	0	SO SO	SO SO	S0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	SO	
Assessment		H0031		Encounter	459	471	\$87,250	\$190	\$185	1
Substance Abuse: Assessment	·	H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	38	44	\$149	\$4	\$3	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0		\$0	0
Health Services		H0034		15 Minutes	0	0	S0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	190	2,139	\$153,100	\$806	\$72	11
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	333	66,042	\$2,356,680	\$7,077	\$36	198
Community Living Supports in Independent living/own home		H0043		Per diem	108	29,528	\$740,064	\$6,852	\$25	273
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0		\$0	\$0	0
Behavior Management Review		H2000	···	Encounter	17	49	\$630	\$37	\$13	3
Comprehensive Medication Services - EBP only		H2000		15 minutes	0	0	\$0	\$0	\$0	0
		H2011		15 Minutes	1,162	7,572	\$759,337	\$653	\$100	
Crisis Intervention Skill-Building and Out of Home Non Vocational Habilitation	<del></del>	H2014		15 minutes	52	25,692	\$739,337	\$1,368	\$3	494
Community Living Supports (15 Minutes)		H2015		15 Minutes	30	52,525	\$159,096	\$5,303	\$3 \$3	1,751
				Per Diem	21	2,953	\$49,945	\$2,378	\$17	141
Community Living Supports (Daily)		H2016	TF	Per Diem	86	17,665	\$929,978	\$10,814	\$53	205
Community Living Supports (Daily)		H2016	TG	Per Diem		17,063	\$2,034,249	\$10,814	\$33 \$107	192
Community Living Supports (Daily)		H2016 H2019	16	15 Minutes	99	19,042	\$2,034,249	\$20,548	\$107	0
Behavior Services	·	H2019 H2021	***	15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound					0	0		\$0	\$0	0
Wraparound		H2022 H2023		Days 15 minutes	236	20,760	\$0		\$23	88
Supported Employment Services		H2023		15 minutes 15 Minutes	0	20,760	\$474,743 \$0	\$2,012 \$0	\$23 \$0	
Mental Health Therapy		FLZUZ /	<del></del>	13 Minutes			20	20	30	

Profession   Pro	Kalamazoo				Unit						
Mesens Anno Computer Cere	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Marches Ander Depretence	Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	172	136,964	\$636,689	\$3,702	\$5	796
Selection (1966   1968   1969   196	Substance Abuse: Outpatient Care		H2035		Hour		<del></del>				
Medican Note   Month   Part	Substance Abuse: Outpatient Care		H2036		Days	0	0				
Parameteries	Medication Review		M0064		Encounter Face-to-Face	1	1				
Pemper Parameter   Special   Speci	Transportation		S0209	-	Per Mile	0	0				
Pember   Particus	Transportation		S0215		Per Mile	0	0				
Public   P	Family Training		S5110		15 Minutes	0	0				
Part Carr	Family Training		S5111		Encounter	0	0				
Part	Foster Care		S5140		Days	0	0				
Page	Foster Care		S5145		Days	1	132				
Performal pregenge Response System (PERS)	Respite		S5150		15 Minutes	1			·		
Person Repressor System (PERS)	Respite		S5151		Per Diem	0	0	-			
Pesson Bergens Pesson	Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0			
Extended Modification   Sirilo   Service   0   0   50   50   50   0   0   0   0	Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0			
Separation of Project   Therapy   S8990   Recounter   0   0   S0   50   50   50   50   50	Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	
Separation Physical Therapy	Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0			
Meth Service	Occupational or Physical Therapy		S8990		Encounter	0	0				
Heath Service   Shallication- Enrolled Program   S444   Hour   0   0   50   50   50   0   0   0   0	Health Services		S9445		Encounter	0	0	\$0	\$0	\$0	0
Intension Criss Subhilications Devolved Program	Health Services		S9446		Encounter	0	0	SO	\$0	\$0	0
Residential Room and Bleard   S8976   Days   0   0   0   50   50   50   0   0   0	Health Services		S9470		Encounter	0	0	SO	\$0	\$0	0
Assessment   T1001	Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	S0	\$0	\$0	0
Health Service	Reidential Room and Board	·	S9976		Days	0	0	S0	\$0	\$0	0
Respite Care	Assessment		T1001		Encounter	0	0	S0	\$0	\$0	0
Reguite Care	Health Services		T1002		Up to 15 min	1,584	11,514	\$721,031	\$455	\$63	7
Respite Care   T1055   TE   15 Minutes   0   0   50   50   50   50   0   5	Respite Care		T1005		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abaser Recovery Support Services   Ti012   Encounter   0   0   0   50   50   50   0   5   5	Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Parally Psycho-Education	Respite Care		T1005	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Supports Coordination/Warp Facilitation   Till   Siminates   Till	Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Targeted Case Management   Ti 1017	Family Psycho-Education		T1015		Encounter	4	4	\$390	\$98	\$98	1
Nursing Home Mental Health Monitoring   T1017   SE   15 minutes   31   433   \$69,504   \$2,242   \$161   14   Personal Care in Licensed Specialized Residential Setting   T1020   TF   Days   75   12,040   \$278,867   \$3,718   \$33   161   70   70   70   70   70   70   70   7	Supports Coordination/Wrap Facilitation		T1016		15 minutes	7	97	\$143,461	\$20,494	\$1,479	14
Personal Care in Licensed Specialized Residential Setting T1020 TF Days 97 12,040 \$278,867 \$3,718 \$23 161     Personal Care in Licensed Specialized Residential Setting T1020 TF Days 97 19,571 \$1,270,799 \$1,101 \$655 202     Personal Care in Licensed Specialized Residential Setting T1020 TG Days 31 \$5,73 \$617,133 \$19,908 \$111 80     Assessments 71023 Encounter 230 264 \$558,288 \$253 \$221 1     Enhanced Medical Supplies or Pharmacy 71999 Items 0 0 0 \$50 \$50 \$50 \$0     Tansportation 72001	Targeted Case Management		T1017		15 minutes	1,067	91,603	\$3,092,234	\$2,898	\$34	86
Personal Care in Licensed Specialized Residential Setting   T1020   TG   Days   31   5,573   \$11,719   \$19,908   \$11,101   \$10   \$	Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	31	433	\$69,504	\$2,242	\$161	14
Personal Care in Licensed Specialized Residential Setting   T1020   TG   Days   31   5,573   \$617,133   \$19,08   \$111   180   \$180	Personal Care in Licensed Specialized Residential Setting		T1020		Days	75	12,040	\$278,867	\$3,718	\$23	161
Passessments   T1023   Encounter   230   264   SS8,288   S253   S221   1	Personal Care in Licensed Specialized Residential Setting		T1020		Days	97	19,571	\$1,270,799	\$13,101	\$65	202
Part	Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days		5,573	\$617,133	\$19,908	\$111	180
Transportation   T2001   Per Diem   O   O   SO   SO   SO   SO   O   Transportation   T2002   Per Diem   O   O   SO   SO   SO   SO   O   O   O	Assessments		T1023		Encounter	230	264	\$58,288	\$253	\$221	1
Transportation   T2002   Per Diem   0   0   50   50   50   0   0   1   1   1   1   1   1   1	Enhanced Medical Supplies or Pharmacy	<del>,</del>			Items		· · · · · · · · · · · · · · · · · · ·	\$0		\$0	0
Transportation   T2003   Encounter/Trip   0   0   S0   S0   S0   S0   0   C   C   C   C   C   C   C   C	Transportation		T2001				0		\$0	\$0	0
Transportation   T2004   0   0   S0   S0   S0   S0   0   0   0	Transportation		***************************************							\$0	0
Transportation   T205   Month   7   60   \$4,680   \$669   \$78   9					Encounter / Trip						
Fiscal Intermediary Services   T2025   Month   7   60   \$4,680   \$669   \$78   9	Transportation		T2004			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies         T2028         Items         0         0         \$0 <td>Transportation</td> <td></td> <td>T2005</td> <td></td> <td></td> <td>0</td> <td>0</td> <td>\$0</td> <td>\$0</td> <td>\$0</td> <td>0</td>	Transportation		T2005			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies         T2029         Items         0         0         S0         S0         \$0         0           Community Living Supports-Therapeutic Camping         T2036         Encounter/Trip         0         0         \$0	Fiscal Intermediary Services				Month			\$4,680	\$669	\$78	9
Community Living Supports-Therapeutic Camping         T2036         Encounter / Trip         0         0         \$0 <td></td> <td></td> <td></td> <td></td> <td>·</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0</td>					·						0
Community Living Supports-Therapeutic Camping         T2037         Encounter / Trip         0         0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$0         \$2,762         \$2,762         \$8           Behanced Medical Equipment-Supplies         T2039         Items         0         0         \$	Enhanced Medical Equipment-Supplies						0	\$0	\$0	\$0	0
Housing Assistance         T2038         Month         22         183         \$505,461         \$22,976         \$2,762         8           Enhanced Medical Equipment-Supplies         T2039         Items         0         0         \$0			T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies         T2039         Items         0         0         \$0 <td>Community Living Supports-Therapeutic Camping</td> <td></td> <td></td> <td></td> <td>Encounter / Trip</td> <td></td> <td></td> <td>\$0</td> <td>\$0</td> <td>S0</td> <td>0</td>	Community Living Supports-Therapeutic Camping				Encounter / Trip			\$0	\$0	S0	0
Pharmacy (Drugs and Other Biologicals)         389         0         \$161,025         \$414         \$0         0           Other         0         0         \$0						22	183	\$505,461	\$22,976	\$2,762	8
Other         0         0         \$0         \$0         \$0         \$0         0			T2039		Items		0	\$0	\$0	\$0	0
								\$161,025	\$414	\$0	0
Aggregate for 'J' Codes ALL 30 0 \$23,952 \$798 \$0 0							0	\$0	\$0	\$0	0
	Aggregate for 'J' Codes		ALL			30	0	\$23,952	\$798	\$0	0

CMHSP Cost Data by Service Category			Adults with M	Iental Iliness		Fiscal Yea	ır 2006-2007		State of	Michigan
Kalamazoo Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Total Population and Cost					3,029		\$20,499,459			

Therapy-Individual Therapy

Therapy-Individual Therapy

Substance Abuse: Outpatient Treatment

Michigan Department of Community Health 05/31/2008 Page 2c2- 113

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 45-50 Min

0

0

455

0

0

4,205

\$0

\$0

\$651,031

\$0

\$0

\$1,431

\$0

\$0

\$155

0

9

90805

90805

90806

0900, 0914, 0915,

0916, 0919

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	· · · · · · · · · · · · · · · · · · ·	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	28	83	\$19,277	\$688	\$232	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	S0	SO	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0		\$0	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	SO	S0	SO	0
Therapy-Individual Therapy		90811	_	Encounter 20-30 Min	0	0	S0	\$0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	S0	S0	So	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	SO.	\$0	\$0	0
Therapy-Individual Therapy		90817	<del>-</del>	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	00	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0		\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0 \$0	\$0 \$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy) Therapy-Individual Therapy		90826 90827		Encounter 45-50 Min Encounter 45-50 Min	0	0	\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy	<del></del>	90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	4	14	\$2,284	\$571	\$163	
Therapy-Family Therapy		90847		Encounter	13	54	\$9,175	\$706	\$170	4
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	30	436	\$68,468	\$2,282	\$157	15
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	429	1,643	\$268,907	\$627	\$164	4

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	So	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other	*	90887		Encounter	0	0	\$0	\$0	\$0	
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0	\$0	
Speech & Language Therapy		92507		Encounter	0	0	\$0	So So		
Speech & Language Therapy		92508	-	Encounter	0	0	SO	\$0	\$0	
Speech & Language Therapy		92526	-	Encounter	0	0	\$0	\$0		0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	\$0	\$0 \$0		0
Psychological Testing by Technician		96102		Per Hour	0	0	S0	\$0 \$0		0
Psychological Testing by Comp		96103		Per Hour	0	0		S0		0
Assessments-Other		96105		Encounter	0	0	S0		S0	0
Assessments-Other		96110		Encounter	0	0				0
Assessments-Other		96111		Encounter	0	0			\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0	\$0 50	<u>\$0</u>	\$0	
Neuropsych test by Psych/Phys		96118		Per Hour	0	0	\$0	\$0	\$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	S0	\$0	\$0	
Neuropsych test Admin w/Comp		96120		Per Hour		0	S0	S0	\$0	0
Physical Therapy		97001		Encounter			\$0	\$0	\$0	0
Physical Therapy	*-	97002			0	0		50		0
Occupational Therapy	<del></del>	97002		Encounter	0	0	\$0	SO	S0	0
Occupational Therapy		97003		Encounter	0	0	\$0	\$0		0
Occupational riferapy Occupational or Physical Therapy		97110		Encounter	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy				15 Minutes	0	0	S0	S0	50	0
Occupational or Physical Therapy		97112 97113		15 Minutes	0	0	SO SO	\$0	S0	0
Occupational of Physical Therapy				15 Minutes	0	0	SO SO	SO		0
		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	S0	S0	0
Occupational or Physical Therapy		97140	-	15 Minutes	0	0	S0		\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	50	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy	12011	97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	50	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	I	1	\$42	\$42	\$42	1
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services	99214	***********	Encounter	0	0	\$0	\$0		
Additional Codes-Physician Services	99215		Encounter	0	0		\$0	\$0	0
Additional Codes-Physician Services	99221		Direction	0	0	\$0		\$0	0
Additional Codes-Physician Services	99222			0	0	\$0	\$0	\$0	
Additional Codes-Physician Services	99223			0	0		\$0	\$0	0
Additional Codes-Physician Services	99231	<del></del>		0		\$0	\$0	\$0	0
Additional Codes-Physician Services	99232			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	99233		<del></del>	0		50	\$0	S0	
Additional Codes-Physician Services	99238	30	Minutes or less	0	0	S0	\$0	\$0	
Additional Codes-Physician Services	99241		Encounter		0	S0		So	0
Additional Codes-Physician Services	99242		Encounter	0	0	S0	\$0	S0	0
Additional Codes-Physician Services	99243		Encounter	0	0	SO	\$0	S0	0
Additional Codes-Physician Services	99244			0	0	S0_	<u>\$0</u>	\$0	0
Additional Codes-Physician Services	99245		Encounter	0	0	S0	\$0	SO	0
Additional Codes-Physician Services	99243		Encounter	0	0	\$0	50	\$0	0
Additional Codes-Physician Services	99251	<del> </del>	Encounter	1	1	\$84	\$84	S84	1
Additional Codes-Physician Services		<del></del>	Encounter	. 0		\$0			0
Additional Codes-Physician Services	99253		Encounter	12	12	\$1,004	\$84	\$84	1
Additional Codes-Physician Services	99254		Encounter	0	0	50	S0	S0_	0
	99255		Encounter	0	0	\$0	S0	S0	0
Additional Codes Physician Services	99261		Encounter	0	0	SO	\$0	SO	0
Additional Codes-Physician Services	99262		Encounter	0	0	\$0	S0	S0	0
Additional Codes-Physician Services	99263		Encounter	00	0	S0	S0	S0	0
Additional Codes-Physician Services	99271		Encounter	0	0	\$0	\$0		0
Additional Codes-Physician Services	99272		Encounter	0	0	\$0	S0	S0	0
Additional Codes-Physician Services	99273		Encounter	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services	99274		Encounter	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services	99275		Encounter	0	0	S0	\$0	S0	0
Medication Administration	99506		Encounter	0	0	\$0	S0	S0	0
Transportation	A0080		Per mile	0	0	S0	\$0	\$0	0
Transportation	A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation	A0100	P	er one-way trip	0	0	\$0	\$0	S0	0
Transportation	A0110	P	er one-way trip	0	0	\$0	\$0	SO	0
Transportation	A0120			0	0	\$0	\$0	\$0	0
Transportation	A0130		2.11	0	0	\$0	\$0	\$0	0
Transportation	A0140			0	0	\$0	\$0	\$0	0
Transportation	A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation	A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	A0427	Refer	to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation	A0428			0	0	\$0	\$0	\$0	0
General dental services	D0150			0	0	\$0	\$0	S0	0
Comp periodontal evaluation	D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical	D0220			0	0	\$0	\$0	S0	0
Intraoral periapical	D0230			0	0		\$0	SO	0
Bitewings	D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult	D1110			0	0	S0	\$0		0
Resin based comp-one surface, ant	D2330			0	0	SO SO	SO	\$0	0
Resin based comp-two surfaces, ant	D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an	D2332			0	0	\$0	\$0		0
Resin based comp-one surface, post	D2391			0	0	\$0	so		0
Resin based comp-two surfaces, post	D2392			0	0	\$0	\$0		0
Resin based comp-three surfaces, post	D2393				0	\$0	\$0	S0	0
succe comp times our taces, post	02373							. 30	

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Lapeer Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high	70 1	D2750			0	0	\$0			
Peridontal, main		D4910			0	0	\$0	\$0 \$0		0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0 \$0		0
Alveoloplasty in conjunction with extractions, per quadrant		D7310		· · · · · · · · · · · · · · · · · · ·	- 0	0	\$0			0_
Behavior Management/dental, by report		D9920	*****		- 0	0	\$0	\$0 \$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0			\$0	0
Family Training/Support EBP only		G0177		Encounter	6	55	\$0	\$0	S0	0
Substance Abuse: Individual Assessment		H0001		Encounter	- 0	0	\$17,357	\$2,893	\$316	9
Assessment		H0002		Encounter	0		\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0002	_	Encounter		0	S0	So	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0 \$0	\$0 \$0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	S0	\$0	- S0	
Substance Abuse: Case Management		H0006								
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Doug	0	0	S0	\$0	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days Days	0		\$0	\$0	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		<del></del>		0	S0	\$0	S0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0014		Days Days	0	0		\$0 \$0	\$0 \$0	0
Crisis Residential Services	0310, 0310, 0313	H0018		Days	6	49	\$12,593			
Substance Abuse: Residential	1002	H0018		Days	0	0	\$12,593 \$0	\$2,099	\$257	8
Substance Abuse: Residential	1002	H0019		Days	0			S0	\$0	0
Substance Abuse: Methadone	1002	H0020		Encounter	0	0	S0	S0	S0	0
Substance Abuse: Early Intervention		H0020		Encounter	0	0	\$0	S0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	. 0	0	\$0	\$0		0
Prevention Services - Direct Model		H0025		Face to Face Contact	0		\$0	50		
Assessment		H0031		Encounter	450	0	50		S0	0
Substance Abuse: Assessment		H0031		Encounter	0	463	\$87,475	\$194	\$189	<u>l</u>
Treatment Planning		H0031			350	0	\$0	\$0	\$0	0
Substance Abuse: Pharmalogical Support - Suboxane		H0032		Encounter Encounter	0	496	\$107,095	\$306	\$216	1
Health Services		H0034			0		\$0	\$0	\$0	
Home Based Services		H0034		15 Minutes		0	\$0	\$0	S0	0
				15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			50	0	\$74,634	\$1,493	\$0	0
Assertive Community Treatment (ACT)	<u> </u>	H0039		15 Minutes	35	8,627	\$481,861	\$13,767	\$56	246
Community Living Supports in Independent living/own home		H0043		Per diem	15	4,304	\$169,178	\$11,279	\$39	287
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	S0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	8	12	\$8,178	\$1,022	\$682	2
Comprehensive Medication Services - EBP only		H2010		15 minutes	. 0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	25	91	\$3,859	\$154	\$42	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	64	27,916	\$100,407	\$1,569	\$4	436
Community Living Supports (15 Minutes)		H2015		15 Minutes	3	1,232	\$3,048	\$1,016	\$2	411
Community Living Supports (Daily)		H2016		Per Diem	8	2,436	\$49,873	\$6,234	\$20	305
Community Living Supports (Daily)		H2016	TF	Per Diem	23	3,478	\$148,046	\$6,437	\$43	151
Community Living Supports (Daily)		H2016	TG	Per Diem	14	3,227	\$380,952	S27,211	\$118	231
Behavior Services		H2019		15 Minutes	0 .	0	S0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	6	1,987	\$12,415	\$2,069	\$6	331
Mental Health Therapy		H2027		15 Minutes	0	0	S0	\$0	S0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs	-	H2030		15 Minutes	42	84,726	\$491,641	\$11,706	\$6	2,017
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	2,017
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	S0	
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	
Transportation		S0209		Per Mile	0	0	\$0	\$0	SO	
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	
Family Training		S5110		15 Minutes	6	144	\$7,573	\$1,262	S53	24
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0		\$0	S0	0
Foster Care		S5145		Days	0	0	S0	\$0	50	
Respite		S5150	-	15 Minutes	0	0		\$0	\$0 \$0	
Respite		S5151		Per Diem	0	0	S0	S0	S0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	S0			0
Personal Emergency Response System (PERS)		S5161		Month	0	0	S0	\$0 \$0		
Environmental Modification		S5165		Service	0	0		\$0	S0	
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	S0	\$0 \$0	S0	0_
Occupational or Physical Therapy		S8990		Encounter	0	0		\$0 \$0	\$0 \$0	
Health Services		S9445		Encounter	0	0		\$0	S0 S0	
Health Services		S9446		Encounter	0	0	S0	\$0 \$0	S0	
Health Services		S9470		Encounter	0	0		\$0 \$0	S0	
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	S0	\$0	S0	
Reidential Room and Board		S9976		Days	0	0	S0	\$0		0
Assessment		T1001		Encounter	0	0	S0		S0	
Health Services		T1002		Up to 15 min	24	220	\$54,361	\$2,265	\$247	9
Respite Care		T1005		15 Minutes	0	0	\$0	\$0	\$0 S0	
Respite Care		T1005	TD	15 Minutes	0	0		\$0	S0	
Respite Care		T1005	TE	15 Minutes	0	0	S0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0 S0	
Family Psycho-Education		T1015		Encounter	6	30	\$5,312	\$885	\$177	5
Supports Coordination/Wrap Facilitation		T1016		15 minutes	164	1,507	\$104,069	\$635	\$69	9
Targeted Case Management		T1017	-	15 minutes	230	5,323	\$408,400	\$1,776	\$77	23
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	1	4	\$210	\$210	\$53	4
Personal Care in Licensed Specialized Residential Setting		T1020		Days	40	8,833	\$83,977	\$2,099	\$10	221
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Davs	2	308	\$14,523	\$7,262	\$47	154
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0	0	\$0	\$0	\$0	0
Assessments		T1023		Encounter	147	185	\$48,492	\$330	\$262	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation	· · · · · · · · · · · · · · · · · · ·	T2004		T	0	0	S0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029	•	Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping	<del></del> .	T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0		0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	
Enhanced Medical Equipment-Supplies		T2039		Items	0	0		\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	
Other					0	0	\$0	\$0	\$0	
Aggregate for 'J' Codes	<del></del>	ALL			0	0		\$0	\$0	
							30	Ψ0		

CMHSP Cost Data by Service Category			Adults with N	Mental Illness		Fiscal Yea	Fiscal Year 2006-2007			State of Michigan		
Lapeer Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case		
Total Population and Cost					785		\$5,071,706					

Therapy-Individual Therapy

Michigan Department of Community Health 05/31/2008 Page 2c2- 120

Encounter 45-50 Min

190

1.684

\$123,774

\$651

\$74

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90806

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	0910, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy	0916, 0919	90808		F26 BO M.						
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	90808		Encounter 75-80 Min Encounter 75-80 Min	0	7	\$1,539	\$1,539	\$220	7
	0916, 0919	70000		Encodiner 73-80 Min	U	U	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0	S0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	S0	<b>S</b> 0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	S0	S0	\$0	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	S0	S0	50	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy	M 7.6 M.C.	90814		Encounter 75-80 Min	0	0	S0	\$0	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	S0	S0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	S0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	. 0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min Encounter 45-50 Min	0	0		08 \$0	\$0 \$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy  Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0		S0	0
Therapy-Family Therapy	·	90846		Encounter	0	0	\$0		S0	0
Therapy-Family Therapy		90847		Encounter	3	16	\$2,352	\$784	\$147	5
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy	, ****	90849		Encounter	0	0	So	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	46	290	\$10,629	\$231	\$37	6
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	So	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	1,016	4,191	\$642,103	\$632	\$153	4

### Adults with Mental Illness Fiscal Year 2006-20

Year 2006-2007 State of Michigan
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Towns.			Addits with M	ciitai iiiicss		Fiscal Year 2006-2007				
Lenawee	Revenue Code	HCPCS Code	Modifier	Unit		** *				
Service Category			Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	S0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	\$0	\$0		
Speech & Language Therapy		92506		Encounter	1	1	\$1,977	\$1,977	\$1,977	1
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508	-	Encounter	0	0	\$0	\$0	S0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	
Speech & Language Therapy	WW.	92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	2	7	\$1,057	\$529	\$151	4
Psychological Testing by Technician		96102		Per Hour	0	0	SO SO	\$0	S0	0
Psychological Testing by Comp		96103		Per Hour	0	0	SO	SO SO		0
Assessments-Other		96105		Encounter	0	0	SO	\$0	50	0
Assessments-Other		96110		Encounter	0	0	SO	SO SO	\$0	0
Assessments-Other		96111		Encounter	0	0	\$0	SO SO	SO	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0		So So		0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0			\$0 \$0	0
Neuropsych test by Tech		96119		Per Hour	0	0	\$0	\$0		0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0		S0		0
Physical Therapy		97001		Encounter	0	0		S0		0
Physical Therapy		97002		Encounter	0	0		\$0 \$0	\$0	0
Occupational Therapy		97003		Encounter	0	0	S0	S0	S0	0
Occupational Therapy		97004		Encounter	0	0		\$0		0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0 \$0	\$0 \$0		0
Occupational or Physical Therapy		97112		15 Minutes	0	0	S0	S0	S0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0		\$0		
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0		S0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0		S0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	S0	\$0	\$0 \$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0		\$0		0
Occupational or Physical Therapy		97532		15 Minutes	0	0		\$0		
Occupational or Physical Therapy		97533		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0		\$0	\$0	- 0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0		\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762		15 Willianos	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	0	0	S0	\$0	\$0	0
Assessment of Health Services		97802		15 Minutes		0				
Health Services		97803		30 Minutes				\$0	\$0	0
				· · · · · · · · · · · · · · · · · · ·	0	0	\$0	\$0	\$0	0
Additional Codes Physician Services		99201 99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services				Encounter		0	\$0	\$0	\$0	0
Additional Codes Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	S0	
Additional Codes Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211	*******	Encourter	0	0	S0	\$0	\$0	. 0
Additional Codes-Physician Services		99212		Encourter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encourter	0	0	\$0	\$0	\$0	0

State of Michigan

# CMHSP Cost Data by Service Category

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Lenawee Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99221		Zinosumo.	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			2	2	\$150	\$75	\$75	
Additional Codes-Physician Services		99223			0	0	\$130	\$0		1
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			1	3	\$135	\$135	\$0 \$45	0
Additional Codes-Physician Services		99233			1	1	\$45	\$45		3
Additional Codes-Physician Services		99238		30 Minutes or less	0	0			\$45	11
Additional Codes-Physician Services		99241		Encounter	- 0	0	\$0	\$0	S0	
Additional Codes-Physician Services		99242		Encounter	0	0	S0	\$0	S0	
Additional Codes-Physician Services		99243		Encounter		0	\$0	\$0	S0	0
Additional Codes-Physician Services		99244		Encounter	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services		99245		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99251		Encounter	0	0	50	<u>\$0</u>	S0	
Additional Codes-Physician Services		99252	<del> </del>	Encounter	0		\$0	\$0	S0	0
Additional Codes-Physician Services	744	99253	-	Encounter	0	0	50	\$0	S0	0
Additional Codes-Physician Services		99254	<u> </u>	Encounter		0	\$0	\$0	S0	0
Additional Codes-Physician Services	-	99255		Encounter	0	0	\$0	\$0	S0	0
Additional Codes-Physician Services		99261			0	0	S0		<u>S0</u>	
Additional Codes-Physician Services	-	99262		Encounter Encounter		0	\$0	SO	S0	
Additional Codes-Physician Services		99263			0	0	\$0	S0	S0	0
Additional Codes-Physician Services		99271		Encounter	- 0	0	\$0	S0	S0	
Additional Codes-Physician Services		99272		Encounter Encounter	0	0	\$0	S0	S0	0
Additional Codes-Physician Services		99273			0	0	\$0	S0	S0	0_
Additional Codes-Physician Services		99274		Encounter Encounter	0	0	S0	\$0	S0	0
Additional Codes-Physician Services		99275		Encounter		0	\$0	SO	\$0	0
Medication Administration		99506		Encounter	0		\$0	\$0	S0	0
Transportation		A0080		Per mile	11	85	\$16,353	\$1,487	\$192	8
Transportation		A0090		Per mile	0	0	\$0	\$0	S0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	S0	0
Transportation		A0110					50	\$0	\$0	0
Transportation		A0110		Per one-way trip		0	\$0	\$0	S0	0
Transportation		A0130		v ====================================	0	0	\$0	\$0	\$0	0_
Transportation		A0140			0	0	\$0	\$0	S0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427			0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0427		Refer to code descriptions.		0	\$0	\$0	\$0	0
General dental services							\$0	\$0		0_
Comp periodontal evaluation	·	D0150		P	0	0	\$0	\$0	\$0	0
		D0180		Encounter	0	0	\$0	S0	\$0	0
Intraoral periapical Intraoral periapical		D0220 D0230			. 0	0	\$0	S0	S0	0
Bitewings					0	0	\$0	\$0		0
		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	S0_	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	S0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	S0	
Resin based comp-one surface, post		D2391		· · · · · · · · · · · · · · · · · · ·	0	0	\$0	\$0	S0	0
Resin based comp-two surfaces, post		D2392			0	0	S0	\$0	S0	0
Resin based comp-three surfaces, post		D2393			0	0	<b>S</b> 0	\$0	\$0	00

Fiscal Year 2006-2007

Lenawee				Unit						· ·
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	S0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	S0	\$0	\$0	
Family Training/Support EBP only		G0177		Encounter	10	60	\$2,160	\$216	\$36	6
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0	\$0	
Assessment		H0002		Encounter	0	0	\$0	\$0	\$0	
Substance Abuse: Individual Assessment		H0002		Encounter	0	0	SO	S0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	SO	S0	50	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	SO	\$0	SO	0
Substance Abuse: Case Management		H0006			0	0	S0	\$0	S0	
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	S0	\$0	S0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0		S0	
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	SO		S0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	SO	SO SO	0
Crisis Residential Services		H0018		Days	0	0	SO	S0	S0	0
Substance Abuse: Residential	1002	H0018		Days	0	0	S0	\$0	\$0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	\$0	\$0	\$0	
Substance Abuse: Methadone		H0020		Encounter	0	0	S0	\$0	SO	0
Substance Abuse: Early Intervention		H0022		Encounter	0	0	S0	\$0	S0	0
Peer Directed and Operated Support Services		H0023		Encounter	26	54,004	\$60,696	\$2,334	SI	2,077
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	S0	\$0	\$0	0
Assessment		H0031		Encounter	1,011	1,842	\$811,162	\$802	\$440	2
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	639	714	\$137,359	\$215	\$192	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	S0	\$0	0
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	S0	SO	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039	·	15 Minutes	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000	-	Encounter	0	0	\$0	\$0	\$0	0
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	S0	\$0	0
Crisis Intervention		H2011		15 Minutes	178	735	\$46,239	\$260	\$63	4
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	40	45,444	\$133,151	\$3,329	\$3	1,136
Community Living Supports (15 Minutes)		H2015		15 Minutes	23	117,916	\$444,543	\$19,328	\$4	5,127
Community Living Supports (Daily)		H2016		Per Diem	1	183	\$4,626	\$4,626	\$25	183
Community Living Supports (Daily)		H2016	TF	Per Diem	5	1,047	\$67,981	\$13,596	\$65	209
Community Living Supports (Daily)		H2016	TG	Per Diem	16	3,758	\$504,436	\$31,527	\$134	235
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	2	19	\$2,012	\$1,006	\$106	10
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 minutes	0	0	S0	\$0	\$0	0
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
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Lenawee				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	97	109,342	\$658,239	\$6,786	\$6	1,127
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	4	80	\$2,880	\$720	\$36	20
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	S0	\$0	0
Foster Care		S5145		Days	0	0	\$0	\$0	SO	0
Respite		S5150		15 Minutes	0	0	S0	S0	So	0
Respite		S5151		Per Diem	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	50	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0	\$0		0
Environmental Modification		S5165		Service	0	0	S0	\$0	50	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	SO	S0	0
Health Services		S9445		Encounter	0	0	\$0	\$0	SO	0
Health Services		S9446		Encounter	0	0	S0	\$0	S0	0
Health Services		S9470		Encounter	0	0	S0	\$0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	S0	S0	S0	0
Reidential Room and Board		S9976		Days	0	0	S0	\$0	S0	0
Assessment		T1001		Encounter	24	26	\$3,033	\$126	\$117	I
Health Services		T1002		Up to 15 min	542	1,550	\$25,839	\$48	\$17	3
Respite Care		T1005		15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	S0	\$0	\$0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	S0	_\$0	S0	0
Family Psycho-Education		T1015		Encounter	8	19	\$432	\$54	\$23	2
Supports Coordination/Wrap Facilitation		T1016		15 minutes	22	351	\$52,955	\$2,407	\$151	16
Targeted Case Management		T1017		15 minutes	335	10,528	\$1,263,044	\$3,770	\$120	31
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	37	1,766	\$211,867	\$5,726	\$120	48
Personal Care in Licensed Specialized Residential Setting		T1020		Days	11	2,310	\$50,866	\$4,624	\$22	210
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	. 6	1,169	\$68,807	\$11,468	\$59	195
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	3	736	\$95,532	\$31,844	\$130	245
Assessments		T1023		Encounter	182	242	\$76,121	\$418	\$315	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			. 0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	S0	\$0	\$0	0_
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	S0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	08	\$0	S0	0
Other		A T T			0	0	\$0	\$0	\$0	
Aggregate for 'J' Codes		ALL			0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category			Adults with M	ental Illness		Fiscal Year 2006-2007			State of Michigan		
Lenawee Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
Total Population and Cost	-				1,460		\$7,001,248				

Therapy-Individual Therapy

Therapy-Individual Therapy

Therapy-Individual Therapy

Substance Abuse: Outpatient Treatment

Substance Abuse: Outpatient Treatment

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Encounter 20-30 Min

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 20-30 Min

Encounter 45-50 Min

90804

90804

90805

90805

90806

0900, 0914, 0915,

0900, 0914, 0915,

0916, 0919

0916, 0919

482

20

0

0

1,161

899

76

0

0

5,685

\$100

\$143

\$0

\$0

\$468

\$54

\$38

SO

SO

\$96

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\$48,425

\$543,552

\$2,850

\$0

SO

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Lifeways Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	90806		Encounter 45-50 Min	320	1,719	\$129,373	\$404	\$75	omocase 5
Therapy-Individual Therapy	0916, 0919	90807		E 45.5036						
Substance Abuse: Outpatient Treatment	0000 0011 0015			Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	4	5	\$553	\$138	\$111	1
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	S0	\$0	SO	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	S0	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	· · · · · · · · · · · · · · · · · · ·	90811		Encounter 20-30 Min	0	0		\$0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0		\$0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	\$0	S0	<b>S</b> 0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	· · · · · · · · · · · · · · · · ·	90813		Encounter 45-50 Min	0	0		S0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0 \$0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0		\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	SO	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	So	\$0	SO	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	S0	\$0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	S0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	3	9	\$865	\$288	\$96	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	63	639	\$23,368	\$371	\$37	10
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	4	14	\$490	\$123	\$35	4
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	1,610	6,563	\$584,970	\$363	\$89	4

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Lifeways Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915,	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0916, 0919	90870		Encounter	0	0	\$0	\$0		
Assessments-Other	***************************************	90887		Encounter	0	0			\$0	0
Speech & Language Therapy		92506		Encounter	0		\$0	\$0	\$0	0
Speech & Language Therapy	····	92507			0	0	02	\$0	\$0	0
Speech & Language Therapy		92508		Encounter Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	0	0	S0	\$0		0
Psychological Testing by Technician		96102	,	Per Hour	0	0	S0	S0	S0	0
Psychological Testing by Comp		96103		Per Hour	0	0	S0	S0	S0	0
Assessments-Other		96105		Encounter	0		S0	\$0	S0	0
Assessments-Other		96110		Encounter	0	0	S0	S0	S0	0
Assessments-Other		96111		Encounter	0	0	S0	S0	\$0	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	17	0	\$0	\$0	S0	0
Neuropsych test by Psych/Phys		96118		Per Hour	0	46	\$4,578	\$269	\$100	3
Neuropsych test by Tech		96119		Per Hour	0	0	S0	S0	S0	0
Neuropsych test Admin w/Comp		96120		Per Hour		0	S0	\$0	S0	0
Physical Therapy		97001		Encounter	0	0	S0	<u>\$0</u>	S0	0
Physical Therapy		97002		<del></del>	0	0	S0	S0	S0	0
Occupational Therapy		97002		Encounter Encounter	0	0	S0	S0	S0	0
Occupational Therapy		97003			8	9	\$1,628	\$204	\$181	1
Occupational or Physical Therapy		97110		Encounter 15 Minutes	0	0	S0	\$0	S0	0
Occupational of Physical Therapy		97112				0	\$0	\$0	S0	0
Occupational of Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	S0	0
Occupational of Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124				0	\$0	S0	S0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy Occupational or Physical Therapy		97150		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97130		Encounter	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy		97532		15 Minutes	0	10	\$197	\$197	S20	10
Occupational of Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes 15 Minutes	0	0			\$0	0
		97537			0	0	S0	\$0	\$0	0
Occupational or Physical Therapy Occupational or Physical Therapy		97542		15 Minutes 15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0 \$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0		\$0 \$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762		15 Minutes	0	0	\$0		\$0	0
Assessment or Health Services		97802		15 Minutes	6	24	\$0	\$0	\$0	0
Assessment or Health Services		97803		15 Minutes	0	0	\$797	\$133	\$33	4
		97804	<del> </del>				\$0		\$0	0
Health Services Additional Codes-Physician Services		97804		30 Minutes Encounter	0	0	\$0	\$0	\$0	0
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Additional Codes-Physician Services Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
		99203		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes Physician Services		99204			0	0	\$0	\$0	\$0	0
Additional Codes Physician Services				Encounter			\$0	\$0		0
Additional Codes-Physician Services		99211		Encounter	44	386	\$8,829	\$201	\$23	9
Additional Codes-Physician Services		99212	** ***	Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99213		Encounter	0	0	\$0	\$0	\$0	0

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Lifeways										<i>B</i>
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		00214								
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	S0	0
Additional Codes-Physician Services	THE	99222			1	1	\$145	\$145	\$145	<u></u>
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services	***	99231 99232			1	4	\$180	\$180	\$45	4
Additional Codes-Physician Services				*****	0	0	SO	\$0	\$0	0
Additional Codes-Physician Services		99233 99238		2026	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	1	1	\$95	\$95	\$95	1
Additional Codes-Physician Services		99241		Encounter	0	0	S0	S0		0
Additional Codes-Physician Services		99242		Encounter	. 0	0	S0	S0	S0	0
Additional Codes-Physician Services				Encounter	0	0	S0	50	S0	0
Additional Codes-Physician Services		99244		Encounter	0	0		S0	\$0	
Additional Codes-Physician Services		99245		Encounter	0	0		\$0	S0	0
		99251		Encounter	0	0	\$0	S0	S0	0
Additional Codes-Physician Services Additional Codes-Physician Services	*	99252		Encounter	0	00	\$0	50	S0	0
		99253		Encounter	0	0	SO	\$0	\$0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services		99255		Encounter	0	0	S0	SO	S0	0
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	S0	S0	0
Additional Codes-Physician Services		99262		Encounter	0	0	\$0	S0	\$0	0
Additional Codes-Physician Services		99263		Encounter	0	0	S0	S0		0
Additional Codes-Physician Services		99271		Encounter	0	0	S0	<u>\$</u> 0	\$0	0
Additional Codes-Physician Services		99272		Encounter	0	0		S0	\$0	0
Additional Codes-Physician Services		99273		Encounter	0	0	\$0	S0	\$0	0
Additional Codes-Physician Services		99274		Encounter	0	0	02	S0	S0	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	S0	0
Medication Administration		99506		Encounter	0	0	\$0	SO	S0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per mile	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	S0	0
Transportation		A0110		Per one-way trip	0	0	SO So	\$0	\$0	0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140		W.F.	0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	17	639	\$2,676	\$157	\$4	38
Additional Codes-Transportation		A0427		Refer to code descriptions.	17	18	\$3,606	\$212	\$200	1
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	S0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

Lifeways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	S0	0
Peridontal, main	* ***	D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210	7.2		0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report	_	D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	\$0	0
Family Training/Support EBP only		G0177		Encounter	8	75	\$6,375	\$797	\$85	9
Substance Abuse: Individual Assessment		H0001		Encounter	251	253	\$28,963	\$115	\$114	1
Assessment		H0002		Encounter	2,271	2,543	\$614,717	\$271	\$242	1
Substance Abuse: Individual Assessment		H0002		Encounter	111	111	\$54,213	\$488	\$488	<u>.</u>
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	212	1,426	\$49,880	\$235	\$35	7
Substance Abuse: Case Management		H0006			0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	43	138	\$22,925	\$533	\$166	3
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	95	836	\$79,778	\$840	\$95	9
Crisis Residential Services		H0018		Days	194	1,428	\$397,134	\$2,047	\$278	7
Substance Abuse: Residential	1002	H0018	-	Days	42	218	\$29,866	\$711	\$137	5
Substance Abuse: Residential	1002	H0019		Days	30	568	\$63,165	\$2,106	\$111	19
Substance Abuse: Methadone		H0020		Encounter	40	10,310	\$72,002	\$1,800	\$7	258
Substance Abuse: Early Intervention		H0022		Encounter	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	692	837	\$120,350	\$174	\$144	1
Substance Abuse: Assessment		H0031		Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		Encounter	80	898	\$52,014	\$650	\$58	11
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 Minutes	0	0	\$0	\$0	\$0	0
Home Based Services		H0036		15 Minutes	0	0	\$0	\$0	\$0	0
Community Psychiatric Supportive Treatment	·	H0037		Per diem	0	0	\$0	\$0	\$0	0
Peer Directed and Operated Support Services	·	H0038		15 minutes	6	252	\$252	\$42	\$1	42
Peer Directed and Operated Support Services	· ·	NA			0	0	\$219,000	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	377	143,053	\$3,985,444	\$10,571	\$28	379
Community Living Supports in Independent living/own home		H0043		Per diem	22	2,908	\$310,680	\$14,122	\$107	132
Respite		H0045	100000	Per Diem	0	0	\$0	S0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	60	68	\$3,791	\$63	\$56	1
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	1,506	7,067	\$232,583	\$154	\$33	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	114	90,367	\$382,296	\$3,353	\$4	793
Community Living Supports (15 Minutes)		H2015		15 Minutes	1	24	\$153	\$153	\$6	24
Community Living Supports (Daily)		H2016		Per Diem	11	2,104	\$306,654	\$27,878	\$146	191
Community Living Supports (Daily)		H2016	TF	Per Diem	10	2,505	\$132,194	\$13,219	\$53	251
Community Living Supports (Daily)		H2016	TG	Per Diem	38	8,467	\$1,005,290	\$26,455	\$119	223
Behavior Services		H2019		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2021		15 Minutes	0	0	\$0	\$0	\$0	0
Wraparound		H2022		Days	0	0	\$0	\$0	\$0	
Supported Employment Services		H2023		15 minutes	12	281	\$1,323	\$110	\$5	23
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	S0	\$0	0

Lifeways				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	67	112,411	\$365,671	\$5,458	\$3	1,678
Substance Abuse: Outpatient Care		H2035		Hour	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	439	837	\$76,475	\$174	\$91	2
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	44	6,093	\$3,800	\$86	\$1	138
Family Training		S5110		15 Minutes	0	96	\$9,999	\$0	\$104	0
Family Training		S5111		Encounter	0	0	\$0	\$0	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	SO	0
Foster Care		S5145		Days	0	0	SO	\$0	SO	
Respite		S5150		15 Minutes	0	0	SO	SO	S0	0
Respite		S5151		Per Diem	0	0	\$0	S0	50	0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Month	0	0	SO	so	SO	0
Environmental Modification		S5165		Service	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Items	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy		S8990		Encounter	0	0	\$0	S0	SO	0
Health Services		S9445		Encounter	0	0	S0	\$0	SO	0
Health Services		S9446		Encounter	0	0	SO	SO	50	0
Health Services		S9470		Encounter	0	0	SO	\$0	\$0	
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	396	1,778	\$191,382	\$483	\$108	4
Reidential Room and Board		S9976		Days	0	0	S0	\$0	S0	0
Assessment		T1001		Encounter	282	284	\$25,310	\$90	\$89	1
Health Services		T1002		Up to 15 min	26	466	\$15,481	\$595	\$33	18
Respite Care		T1005		15 Minutes	1	388	\$6,840	\$6,840	\$18	388
Respite Care		T1005	TD	15 Minutes	0	0	\$18	\$0	SO	0
Respite Care		T1005	TE	15 Minutes	0	0	so	\$0	S0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	\$0	\$0	\$0	0
Family Psycho-Education		T1015		Encounter	13	44	\$4,560	\$351	\$104	3
Supports Coordination/Wrap Facilitation		T1016		15 minutes	106	10,445	\$279,761	\$2,639	\$27	99
Targeted Case Management		T1017		15 minutes	686	42,894	\$1,141,779	\$1,664	\$27	63
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Days	16	819	\$62,094	\$3,881	\$76	51
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	4	865	\$168,470	\$42,118	\$195	216
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	2	729	\$72,355	\$36,177	\$99	365
Assessments		T1023		Encounter	344	347	\$47,887	\$139	\$138	11
Enhanced Medical Supplies or Pharmacy	<u>.</u>	T1999		Items	677	3,508	\$102,451	\$151	\$29	5
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	62	417	\$31,970	\$516	\$77	7
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					95	0	\$306,302	\$3,224	\$0	0
Other					0	0	\$1,982,621	\$0	\$0	0
Aggregate for 'J' Codes		ALL			0	0	\$115,283	\$0	\$0	0

CMHSP Cost Data by Service Category			Adults with M	Iental Iliness		Fiscal Yea		State of Michigan		
Lifeways Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Total Population and Cost					5,269		\$18,302,572			

CMHSP Cost Data by Service Category			Adults with N	Mental Illness		Fiscal Year	2006-2007		State of	Michigan
Livingston				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	0	0	\$0	\$0	\$0	0
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	16	145	\$111,240	\$6,952	\$767	9
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	116	1,050	\$805,529	\$6,944	\$767	9
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		_	Days	0	0	SO	\$0	S0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0	0	\$0	S0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0	0	S0	SO	S0	0
ECT Anesthesia	0370				0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424		-	# of treatments	0	0	S0	\$0	S0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	S0	\$0	SO	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	S0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	\$0	SO	S0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	S0	S0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	SO	S0	S0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	S0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Ноит	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	2	26	\$23,404	\$11,702	\$900	13
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919		_	# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	. 0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772	***	Encounter	141	711	\$48,682	\$345	\$68	5
Assessment-Psychiatric Assessment		90801	*	Encounter	137	139	\$40,733	\$297	\$293	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	0000 0011 0015	90804		Encounter 20-30 Min	107	373	\$33,100	\$309	\$89	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0		\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	S0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	287	3,046	\$496,696	\$1,731	\$163	11

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Livingston Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	90806		Encounter 45-50 Min	0	0	\$0	\$0	SO SO	01111/Case
Therapy-Individual Therapy	0916, 0919	^^^								
		90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	29	49	\$14,829	\$511	\$303	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	S0	\$0	S0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	SO	S0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	SO	\$0	\$0	- 0
Therapy-Individual Therapy		90811	<del></del>	Encounter 20-30 Min	0	0	SO	SO	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	S0	\$0 \$0	S0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0	S0	\$0	50	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	\$0	\$0	SO SO	0
Therapy-Individual Therapy	· .	90813		Encounter 45-50 Min	0	0	SO	\$0	\$0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	<u> </u>	90814		Encounter 75-80 Min	0	0	SO	\$0	SO	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	· · · · · · · · · · · · · · · · · · ·	90815		Encounter 75-80 Min	0	0	\$0		SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	So	so	S0	0
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824	•	Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	1	4	\$356	\$356	\$89	4
Therapy-Family Therapy		90847		Encounter	10	28	\$3,973	\$397	\$142	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	111	1,366	\$159,399	\$1,436	\$117	12
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0	\$0	\$0	0
Medication Review		90862		Encounter	506	2,522	\$319,406	\$631	\$127	5

Livingston										B
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician	0710, 0717	90870		Encounter	0	0	\$0	\$0	60	
Assessments-Other		90887		Encounter	0	0	\$0		\$0	0
Speech & Language Therapy		92506		Encounter	0	0	\$0	\$0 \$0	\$0	0
Speech & Language Therapy	****	92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0			<u>\$0</u>	0
Speech & Language Therapy		92526	·	Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0 60	\$0	\$0	0
Psychological Testing PSYCH/PHYS	***	96101		Per Hour	2		\$0			
Psychological Testing by Technician	<del>-</del>	96102		Per Hour	0	6 	S820	\$410	S137	
Psychological Testing by Comp		96103		Per Hour	0	0	S0	S0	S0	0
Assessments-Other		96105		Encounter	0		\$0	S0	S0	0
Assessments-Other		96110		Encounter	0	0	<u></u>	<u>S0</u>	S0	
Assessments-Other		96111				<del>-</del>	\$0	\$0	<u>\$0</u>	0
Neurobehavioral Status Exam (Children's Waiver)		96116		Encounter	1	1	\$137	\$137	\$137	1
Neuropsych test by Psych/Phys		-		Per Hour	0	0	S0	S0	S0_	0
Neuropsych test by Tech		96118		Per Hour	0	0	S0	S0_	\$0	0
		96119		Per Hour	0	0	\$0	\$0	50	0
Neuropsych test Admin w/Comp		96120		Per Hour	0	0	\$0	\$0	\$0	0
Physical Therapy		97001		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97002		Encounter	0	0	\$0	\$0	S0	0
Occupational Therapy		97003		Encounter	0	0	S0	S0	50	. 0
Occupational Therapy		97004		Encounter	0	0	S0	\$0	S0	0
Occupational or Physical Therapy		97110		15 Minutes	0	0	\$0	S0	S0	0
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	S0_	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	S0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	S0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	SO	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	S0	S0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	\$0	S0	\$0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	1	11	\$127	\$127	\$12	11
Assessment or Health Services		97803		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	SO	\$0	\$0	0
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99212		Encounter	0	0	S0	\$0		
Additional Codes-Physician Services		99213		Encounter	0	0		so		0
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Livingston				Unit						Ü
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222		*	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99232			0	0	\$0	\$0		0
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0 \$0	
Additional Codes-Physician Services		99238		30 Minutes or less	0	0		\$0	S0	0
Additional Codes-Physician Services		99241		Encounter	0	0		\$0		0
Additional Codes-Physician Services		99242		Encounter	0	0			S0	0
Additional Codes-Physician Services		99243		Encounter	0	0		So		
Additional Codes-Physician Services		99244	***	Encounter	0	0		\$0		
Additional Codes-Physician Services		99245		Encounter	0	0	S0	S0	<u></u>	
Additional Codes-Physician Services		99251	•••	Encounter	0	0		\$0	S0	
Additional Codes-Physician Services		99252		Encounter	0	0		SO	S0	0
Additional Codes-Physician Services		99253		Encounter	0	0	S0	\$0	S0	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0 \$0	S0	
Additional Codes-Physician Services		99255		Encounter	0	0	\$0		S0	0
Additional Codes-Physician Services		99261		Encounter	0	0	S0	S0	S0	
Additional Codes-Physician Services		99262	-	Encounter	0	0		\$0	S0	0
Additional Codes-Physician Services		99263		Encounter	0	0	S0		S0	
Additional Codes-Physician Services		99271		Encounter	0	0		\$0	S0	
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0 \$0	S0 S0	0
Additional Codes-Physician Services		99273		Encounter	0	0			S0	
Additional Codes-Physician Services		99274		Encounter	0	0	\$0		S0	
Additional Codes-Physician Services		99275	,	Encounter	0	0	\$0	SO	S0	
Medication Administration	•	99506		Encounter	0	0		\$0		
Transportation		A0080		Per mile	0	0	\$0	\$0		
Transportation		A0090		Per mile	0	0	\$0	SO SO	S0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0		0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0		0
Transportation		A0120			0	0	\$0	\$0	\$0	0
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170	***************************************		0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation	· · · · · · · · · · · · · · · · · · ·	A0428	,		0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical	,	D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	\$0	
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, ant	. =000	D2331		<u></u>	0	0	\$0	SO SO	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0		0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	
Resin based comp-two surfaces, post		D2392	-			0		\$0	\$0	
Resin based comp-three surfaces, post		D2393				0	\$0	\$0	\$0	
									30	

Livingston										
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750			0	0	\$0	\$0	\$0	0
Peridontal, main	-	D4910			0	0	\$0	\$0	\$0	
Surgical removal of erupted tooth	<del></del>	D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310				. 0	\$0	\$0	\$0 \$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies	-	E1399		Items	0	0	\$0	\$0	\$0	
Family Training/Support EBP only		G0177		Encounter	8	56	\$7,029	S879	\$126	7
Substance Abuse: Individual Assessment	-	H0001		Encounter	0	0	\$7,029	\$0	\$0	
Assessment		H0002		Encounter	0	0		\$0 \$0	\$0 \$0	
Substance Abuse: Individual Assessment	****	H0002		Encounter	0	0		S0	S0 S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	\$0	\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005		Encounter	0	0	So	\$0	\$0	0
Substance Abuse: Case Management	· · · · · · · · · · · · · · · · · · ·	H0006			0	0	SO	S0	SO	0
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0			50	
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0	S0	\$0 \$0	S0	
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	- 0	0			S0	0
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015		Days	0	0	\$0	\$0	\$0	
Crisis Residential Services		H0018		Days	0 -	0	S0	S0	SO	0
Substance Abuse: Residential	1002	H0018		Days	0	0	S0	S0	S0	0
Substance Abuse: Residential	1002	H0019		Days	0	0	S0	S0	S0	0
Substance Abuse: Methadone		H0020		Encounter	0	- 0	\$0		S0	
Substance Abuse: Early Intervention		H0022		Encounter	0	0		S0	S0	0
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	S0	So	
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	S0	\$0	SO	
Assessment	***************************************	H0031		Encounter	227	234	\$127,850	\$563	\$546	
Substance Abuse: Assessment		H0031		Encounter	0	0		\$0	SO	0
Treatment Planning		H0032		Encounter	79	115	\$19,580	\$248	\$170	1
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$0	\$0	S0	0
Health Services		H0034		15 Minutes	0	0	SO	\$0	so	0
Home Based Services		H0036		15 Minutes	45	2,378	\$133,263	\$2,961	\$56	53
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	SO SO	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	9	258	\$13,630	\$1,514	\$53	29
Peer Directed and Operated Support Services		NA			0	0	\$0	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		15 Minutes	70	16,769	\$730,122	\$10,430	\$44	240
Community Living Supports in Independent living/own home		H0043		Per diem	0	0	\$0	\$0	\$0	0
Respite		H0045		Per Diem	0	0	\$0	\$0	\$0	0
Substance Abuse: Individual Assessment		H0049		Encounter	0	0	SO	\$0	\$0	0
Behavior Management Review		H2000		Encounter	4	8	\$811	\$203	\$101	2
Comprehensive Medication Services - EBP only	***	H2010		15 minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	166	474	\$18,486	\$111	\$39	3
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	11	11,252	\$44,670	\$4,061	\$4	1,023
Community Living Supports (15 Minutes)		H2015		15 Minutes	80	201,233	\$623,822	\$7,798	\$3	2,515
		H2015		Per Diem	0	0	\$023,822	\$7,798 \$0	\$0	2,313
Community Living Supports (Daily)		H2016	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (Daily)  Community Living Supports (Daily)	-	H2016	TG	Per Diem	4	1,172	\$222,715	\$55,679	\$190	293
Behavior Services		H2016	10	15 Minutes	. 4	0	\$222,715	\$55,679	\$190	0
Wraparound		H2019		15 Minutes		38	\$4,376	\$4,376	\$115	38
· · · · · · · · · · · · · · · · · · ·		H2021		Days	0	- 38	\$4,376	\$4,376	\$113	
Wraparound Supported Employment Sequines		H2022		15 minutes	9	9,923	\$31,456	\$3,495	\$3	1,103
Supported Employment Services		H2023 H2027		15 minutes 15 Minutes	0	9,923	\$31,456	\$3,495 \$0	\$3 	1,103
Mental Health Therapy		F12027		13 Minutes	U	0	\$0	30		

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Livingston Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes		. 481				
Substance Abuse: Outpatient Care		H2035	-	Hour	67	69,367	\$369,032	\$5,508	\$5	1,035
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0	\$0	\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	0
Family Training		S5110		15 Minutes	0	<u>-</u>	\$0	\$0	\$0	0
Family Training		S5111		Encounter	0	0	\$0	SO	\$0	0
Foster Care		S5140		Days	0	0	\$0	\$0	\$0	0
Foster Care		S5145	-	<del></del>	0	0	\$0		\$0	0
Respite		S5150		Days 15 Minutes	8	0	\$0	S0		
Respite		S5150		Per Diem		2,553	\$5,412	\$677	S2	319
Personal Emergency Response System (PERS)		S5151 S5160	*****		0	0	0	S0	S0	0
Personal Emergency Response System (PERS)		S5161	<u> </u>	Encounter	0	0		\$0	\$0	0
Environmental Modification				Month	0	0	S0	\$0	S0	0
Enhanced Medical Equipment-Supplies		S5165		Service	0	0	S0	S0_	\$0	0
Occupational or Physical Therapy		S5199		Items	0	0	S0	S0	\$0	0
Health Services		S8990		Encounter	0	0	\$0	\$0	S0	0
		S9445	ă.	Encounter	0	0	S0	S0	\$0	0
Health Services		S9446		Encounter	13	39	\$2,806	\$216	S72	3
Health Services		S9470		Encounter	0	0	\$0	S0	\$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	0	0	S0	\$0	\$0	0
Reidential Room and Board		S9976		Days	0	0	\$0	50	\$0	0
Assessment		T1001		Encounter	2	4	\$2,911	\$1,456	\$728	2_
Health Services		T1002		Up to 15 min	61	142	\$15,878	\$260	\$112	2
Respite Care		T1005		15 Minutes	1	10	\$92	\$92	S9	10
Respite Care		T1005	TD	15 Minutes	0	0	S0	S0	\$0	0
Respite Care		T1005	TE	15 Minutes	0	0	S0	\$0	S0	0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	SO	\$0	S0	0
Family Psycho-Education		T1015		Encounter	5	6	\$2,514	\$503	\$419	1
Supports Coordination/Wrap Facilitation		T1016		15 minutes	20	555	\$57,276	\$2,864	\$103	28
Targeted Case Management		T1017		15 minutes	322	11,769	\$1,062,388	\$3,299	\$90	37
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	13	208	\$18,776	\$1,444	\$90	16
Personal Care in Licensed Specialized Residential Setting		T1020		Days	1	203	\$6,579	\$6,579	\$32	203
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	1	298	\$17,561	\$17,561	\$59	298
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	0		\$0	\$0	\$0	0
Assessments		T1023		Encounter	119	150	\$18,666	\$157	\$124	1
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Month	2	24	\$2,966	\$1,483	\$124	12
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	SO	\$0	\$0	0
Enhanced Medical Equipment-Supplies	"	T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	S0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes	· residence	ALL			0	0	\$0	\$0	\$0	0

Total Population and Cost					921		\$5,619,100				
Livingston Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
CMHSP Cost Data by Service Category			Adults with M	lental Illness		Fiscal Yea	ar 2006-2007		State of Michigan		

			Adults with N	Mental Illness		Fiscal Yea	ar 2006-2007		State of Michigan	
Macomb				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154	7.0	PT22	Days	37	9,683	\$3,393,186	\$91,708	\$350	262
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0	0	\$0	\$0	\$0	0
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	1,370	22,812	\$7,778,130	\$5,677	\$341	17
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	616	4,278	\$1,730,748	\$2,810	\$405	7
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183		-	Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0	0	\$0	SO	SO	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0	0	\$0	S0	So	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307		_	# of tests	0	0	SO	\$0	So	0
Inpatient Hospital Ancillary Services - Radiology	0320		-	# of tests	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370				0	0	SO	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410		_	# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0	0	SO	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0	0	S0	\$0	SO	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	1,318	1,874	\$224,895	\$171	\$120	1
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0	0	SO	\$0	\$0	
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611	-		# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710				0	0	\$0	\$0	So	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0	0	\$0	\$0	SO	0
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Hour	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Encounter	11	69	\$31,515	\$2,865	\$457	6
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			Days	345	2,403	\$464,869	\$1,347	\$193	7
Outpatient Partial Hospitalization	0913			Days	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		90772		Encounter	380	3,175	\$327,673	\$862	\$103	8
Assessment-Psychiatric Assessment		90801		Encounter	4,501	6,459	\$1,527,528	\$339	\$236	1
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0	0	\$0	\$0	\$0	0
Assessment-Psychiatric Assessment		90802		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90804		Encounter 20-30 Min	773	1,306	\$119,958	\$155	\$92	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90806		Encounter 45-50 Min	3,260	25,962	\$2,711,796	\$832	\$104	8

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Macomb Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Outpatient Treatment	0900, 0914, 0915,	90806		Encounter 45-50 Min	0	0	Cost \$0	\$0	\$0	
Therapy-Individual Therapy	0916, 0919	00007								
Substance Abuse: Outpatient Treatment	0000 0014 0015	90807		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90808		Encounter 75-80 Min	80	137	\$43,380	\$542	\$317	2
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0	0	So	\$0	\$0	0
Therapy-Individual Therapy		90809		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0	0	\$0	SO	S0	0
Therapy-Individual Therapy		90810		Encounter 20-30 Min	0	0	\$0	SO	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0	0	SO	50	\$0	0
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0	0		\$0		
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0	0	\$0	SO	S0	0
Therapy-Individual Therapy		90812		Encounter 45-50 Min	0	0		\$0	S0	
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0	0	SO	\$0	SO	0
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0	0	SO	50	SO	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90814		Encounter 75-80 Min	0	0	\$0	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0	0	SO	SO	SO	0
Therapy-Individual Therapy		90815		Encounter 75-80 Min	0	0	\$0	SO	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	Vet 1	90816		Encounter 20-30 Min	0	0	\$0	S0	\$0	0
Therapy-Individual Therapy	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	90817		Encounter 20-30 Min	0	0	\$0	\$0	S0	0
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	90819		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Substance Abuse: Psychotherapy (Individual Therapy)		90826		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy	P. 14-49	90828		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90846		Encounter	15	18	\$3,002	\$200	\$167	1
Therapy-Family Therapy		90847		Encounter	159	407	\$65,265	\$410	\$160	3
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90847		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	262	2,392	\$155,683	\$594	\$65	9
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90853		Encounter	0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90857		Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90857		Encounter	0	0	\$0 	\$0	\$0	0
Medication Review		90862		Encounter	5,374	27,777	\$2,617,969	\$487	\$94	5

Macomb				Unit						Z
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	0	0	So	S0	\$0	0
Speech & Language Therapy		92506		Encounter	0	0	S0	\$0	\$0	0
Speech & Language Therapy		92507		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	SO SO	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	so	SO SO	
Speech & Language Therapy		92610		Encounter	0	0	\$0	SO	S0	0
Psychological Testing PSYCH/PHYS		96101		Per Hour	46	113	\$16,000	S348	\$142	
Psychological Testing by Technician		96102		Per Hour	0	0	\$10,000	\$0	\$0	- 2
Psychological Testing by Comp		96103		Per Hour	0	0	So	S0	S0	
Assessments-Other		96105		Encounter	0	0	S0	\$0	S0	0
Assessments-Other		96110		Encounter	0	0	\$0			
Assessments-Other		96111	<del>-</del>	Encounter	0	0		S0	S0	
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	0	0				- 0
Neuropsych test by Psych/Phys		96118		Per Hour	0	0			S0	0
Neuropsych test by Tech		96119		Per Hour		0	<del>_</del>	<u>\$0</u>	S0	
Neuropsych test Admin w/Comp		96120	1	Per Hour	0	0	S0	S0	\$0	0
Physical Therapy		97001		Encounter	0	0	S0	<u>S0</u>	S0	0
Physical Therapy		97002		Encounter	0		S0	\$0	S0	0
Occupational Therapy		97003		Encounter	1	0	SO .	<u>\$0</u>	\$0	. 0
Occupational Therapy		97003	<del></del> .		· ·	1	\$200	\$200	\$200	1
Occupational or Physical Therapy		97110		Encounter	0	0	S0	S0	S0	0
Occupational or Physical Therapy				15 Minutes	0	0	\$0	SO	\$0	0
	- 116.4	97112		15 Minutes	0	0	\$0	\$0	SO	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	S0	\$0	S0	0
Occupational or Physical Therapy		97116		15 Minutes	0	0	\$0	\$0	\$0	00
Occupational or Physical Therapy		97124		15 Minutes	0	0	S0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97530		15 Minutes	0	0	SO	\$0	S0	0
Occupational or Physical Therapy		97532		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97533		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97535		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97537		15 Minutes		0	\$0	\$0	\$0	. 0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97703		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	so	\$0	0
Occupational Therapy		97760		15 Minutes	0	0	S0	\$0	\$0	0
C/O for Orthotic/Prosth Use		97762			0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		15 Minutes	47	153	\$24,274	\$516	\$159	3
Assessment or Health Services		97803		15 Minutes	62	497	\$66,537	\$1,073	\$134	8
Health Services		97804		30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99201		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99202		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99203		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99204		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99205		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99211		Encounter	2	18	\$835	\$418	\$46	9
Additional Codes-Physician Services		99212		Encounter	0	0	\$0	\$0	\$0	
Additional Codes-Physician Services		99213		Encounter		0	\$0		\$0	0
. Idditional Codes-1 hysician services		7/213		Licounti		······································	30	20	30	U

Macomb				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99214		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99215		Encounter	1	1	\$371	\$371	\$371	
Additional Codes-Physician Services		99221			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99222			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99223			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		1 0.00	0	0	\$0	so	\$0	
Additional Codes-Physician Services		99232			0	0	\$0	\$0	So	
Additional Codes-Physician Services		99233			0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99238		30 Minutes or less	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services		99241	-	Encounter	0	0	S0	S0	SO	
Additional Codes-Physician Services		99242		Encounter	0	0	SO SO		SO	0
Additional Codes-Physician Services		99243		Encounter	0	0	\$0	SO	S0	
Additional Codes-Physician Services		99244		Encounter	0	0	S0	\$0	SO	
Additional Codes-Physician Services		99245		Encounter	0	0	S0	\$0	SO	- 0
Additional Codes-Physician Services		99251		Encounter	0	0	\$0	\$0	S0	
Additional Codes-Physician Services		99252		Encounter	0	0	\$0	SO		0
Additional Codes-Physician Services		99253		Encounter	0	0	SO	\$0	SO	0
Additional Codes-Physician Services		99254		Encounter	0	0	\$0	\$0	So	
Additional Codes-Physician Services		99255		Encounter	0	0	S0	\$0	SO	
Additional Codes-Physician Services		99261		Encounter	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services	·-	99262		Encounter	0	0	\$0	\$0	SO	0
Additional Codes-Physician Services		99263		Encounter	0	0	\$0	SO	SO	- 0
Additional Codes-Physician Services		99271		Encounter	0	0	SO SO	S0	SO	
Additional Codes-Physician Services		99272		Encounter	0	0	\$0	\$0	50	
Additional Codes-Physician Services		99273		Encounter	0	0	SO	\$0	So	
Additional Codes-Physician Services		99274		Encounter	0	0	SO	\$0	SO	0
Additional Codes-Physician Services		99275		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Encounter	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per mile	0	0	\$0	\$0	SO	0
Transportation		A0090		Per mile	0	0	\$0	\$0	S0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	S0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			31	1,546	\$15,577	\$502	\$10	50
Transportation		A0130			0	0	\$0	\$0	\$0	0
Transportation		A0140			0	0	\$0	\$0	\$0	0
Transportation		A0160		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0170			0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Per Mile	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Additional codes - Transportation		A0428			0	0	\$0	\$0	\$0	0
General dental services		D0150			0	0	\$0	\$0	\$0	0
Comp periodontal evaluation		D0180		Encounter	0	0	\$0	\$0	\$0	0
Intraoral periapical		D0220			0	0	\$0	\$0	\$0	0
Intraoral periapical		D0230			0	0	\$0	\$0	\$0	0
Bitewings		D0274			0	0	\$0	\$0	\$0	0
Prophylaxis Adult		D1110			0	0	\$0	\$0	S0	0
Resin based comp-one surface, ant		D2330			0	0	\$0	\$0	SO	0
Resin based comp-two surfaces, ant		D2331			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, an		D2332			0	0	\$0	\$0	\$0	0
Resin based comp-one surface, post		D2391			0	0	\$0	\$0	\$0	0
Resin based comp-two surfaces, post		D2392			0	0	\$0	\$0	\$0	0
Resin based comp-three surfaces, post		D2393			0	0	\$0	\$0	\$0	0

Macomb				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Crown, porc, fused to high		D2750		-	0	0	\$0	SO	\$0	0
Peridontal, main		D4910			0	0	\$0	\$0	\$0	0
Surgical removal of erupted tooth		D7210			0	0	\$0	\$0	\$0	0
Alveoloplasty in conjunction with extractions, per quadrant		D7310			0	0	\$0	\$0	\$0	0
Behavior Management/dental, by report		D9920			0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		Items	0	0	\$0	\$0	SO	0
Family Training/Support EBP only		G0177		Encounter	0	0	50	\$0		
Substance Abuse: Individual Assessment		H0001		Encounter	0	0	\$0	\$0		
Assessment	=	H0002		Encounter	0	0	\$0 \$0	\$0 \$0	S0	
Substance Abuse: Individual Assessment		H0002		Encounter	0	0		\$0 \$0		0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0004		15 Minutes	0	0	SO SO	\$0	S0	0
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	H0005	- \$ 70 H	Encounter	0	0	SO	\$0	\$0	0
Substance Abuse: Case Management	,	H0006		<del></del>	0	0	So			
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0	0	S0 S0	<u>\$0</u>	\$0	
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0	0			\$0	- 0
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0	0	S0		S0	
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H0015	-	Days	0	0	\$0 \$0	\$0	\$0 \$0	0
Crisis Residential Services	· · · · · · · · · · · · · · · · · · ·	H0018		Days	168	1,786	\$443,275	\$2,639	\$248	11
Substance Abuse: Residential	1002	H0018	-	Days	0	0	\$0	\$0	\$0	
Substance Abuse: Residential	1002	H0019		Days	0	0	SO	S0		0
Substance Abuse: Methadone		H0020		Encounter	0	0	SO		\$0	
Substance Abuse: Early Intervention		H0022		Encounter	0	0		SO	S0	0
Peer Directed and Operated Support Services		H0023		Encounter	650	67,600	\$175,947	\$271	\$3	104
Prevention Services - Direct Model		H0025		Face to Face Contact	0	0	\$0	\$0	\$0	0
Assessment		H0031		Encounter	2,152	2,221	\$583,796	\$271	\$263	1
Substance Abuse: Assessment		H0031		Encounter	0	0	S0	\$0	\$0 \$0	<u>.</u>
Treatment Planning		H0032	-	Encounter	3,037	4,878	\$633,295	\$209	\$130	2
Substance Abuse: Pharmalogical Support - Suboxane		H0033		Encounter	0	0	\$000,200	\$0	\$0	0
Health Services		H0034		15 Minutes	675	2,702	\$252,745	\$374	\$94	4
Home Based Services		H0036		15 Minutes	22	4,156	\$288,911	\$13,132	\$70	189
Community Psychiatric Supportive Treatment		H0037		Per diem	0	0	\$0	\$15,152	\$0	0
Peer Directed and Operated Support Services		H0038		15 minutes	1	4	\$207	\$207	\$52	4
Peer Directed and Operated Support Services		NA		15 111111111	0	0	\$0	\$0	\$0	
Assertive Community Treatment (ACT)		H0039		15 Minutes	227	20,685	\$2,358,625	\$10,390	\$114	91
Community Living Supports in Independent living/own home		H0043		Per diem	104	25,618	\$1,473,604	\$14,169	\$58	246
Respite		H0045		Per Diem	0	0	\$1,115,001 S0	\$0	\$0	
Substance Abuse: Individual Assessment	*****	H0049		Encounter	0	0	\$0	\$0	\$0	0
Behavior Management Review		H2000		Encounter	1	3	\$163	\$163	\$54	3
Comprehensive Medication Services - EBP only		H2010		15 minutes	0	0	\$0	\$0	\$0	
Crisis Intervention		H2011		15 Minutes	310	1,745	\$348,488	\$1,124	\$200	6
Skill-Building and Out of Home Non Vocational Habilitation		H2011		15 minutes	58	93,165	\$221,982	\$3,827	\$200	1,606
		H2015		15 Minutes	49	62,851	\$235,976	\$4,816	\$4	1,283
Community Living Supports (15 Minutes)		H2015		Per Diem	23	6,552		\$10,046	\$4 \$35	285
Community Living Supports (Daily)		H2016	TF	Per Diem Per Diem	92	25,934	\$231,066		\$35 \$67	285
Community Living Supports (Daily)			TG			25,934 87,244	\$1,728,168	\$18,784		
Community Living Supports (Daily)		H2016 H2019	16	Per Diem 15 Minutes	360	87,244	\$9,826,925 \$0	\$27,297 \$0	\$113 \$0	242
Behavior Services		H2019 H2021		15 Minutes	0	0	50	\$0	\$0 \$0	0
Wraparound					2	-				12
Wraparound Company Company		H2022		Days		582	\$6,095	\$3,048	\$254	
Supported Employment Services		H2023		15 minutes			\$1,227	\$614	\$2	291
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	

State of Michigan

						State of Whenigan				
Macomb Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes						
Substance Abuse: Outpatient Care		H2035		Hour	212	262,235	\$1,233,942	\$5,820	\$5	1,237
Substance Abuse: Outpatient Care		H2036		Days	0	0	\$0	\$0 \$0	\$0	0
Medication Review		M0064		Encounter Face-to-Face	0	0		\$0	\$0	0
Transportation		S0209		Per Mile	0	0	\$0	\$0	\$0 \$0	0
Transportation		S0215		Per Mile	0	0	\$0	\$0	\$0	
Family Training		S5110		15 Minutes	0	0		\$0	\$0 \$0	0
Family Training	**	\$5111		Encounter	3	8	\$1,616	\$539	\$202	
Foster Care		S5140		Days	0	0	\$1,010	\$339	\$202 \$0	3
Foster Care		S5145		Days	0	0		S0	\$0	
Respite		S5150		15 Minutes	0	0		SO SO		0
Respite		\$5151		Per Diem	0	0	S0			0
Personal Emergency Response System (PERS)		S5160		Encounter	0	0	S0		\$0 \$0	
Personal Emergency Response System (PERS)		S5161		Month	0	0	\$0			
Environmental Modification		S5165		Service	0	0	\$0	\$0 \$0	S0	0
Enhanced Medical Equipment-Supplies	· · · · · · · · · · · · · · · · · · ·	S5199		Items	0	0		S0		0
Occupational or Physical Therapy		S8990		Encounter	0	0	S0			- 0
Health Services		S9445		Encounter	0	0	\$0	<u>30</u>		0
Health Services		S9446		Encounter	18	46	\$2,993	\$166	\$65	3
Health Services		S9470	·	Encounter	0	0	\$2,393 \$0	\$100	\$00 \$0	0
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	49	94	\$40,992	\$837	\$436	2
Reidential Room and Board		S9976		Days	0	0	\$10,992	\$0 S0	\$436 \$0	0
Assessment		T1001		Encounter	491	518	\$95,613	\$195		1
Health Services		T1002		Up to 15 min	672	8,318	\$668,288	\$994	S80	12
Respite Care		T1005		15 Minutes	5	2,896	\$11,194	\$2,239	S4	579
Respite Care		T1005	TD	15 Minutes	0	0	\$0	\$0		0
Respite Care		T1005	TE	15 Minutes	0	0	S0	\$0		0
Substance Abuse: Recovery Support Services		T1012		Encounter	0	0	SO SO	\$0	SO SO	0
Family Psycho-Education		T1015		Encounter	0	0		\$0	\$0	0
Supports Coordination/Wrap Facilitation		T1016	•	15 minutes	32	483	\$148,518	\$4,641	\$307	15
Targeted Case Management		T1017		15 minutes	2,722	58,194	\$4,538,666	\$1,667	\$78	21
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	90	2,637	\$305,436	\$3,394	\$116	29
Personal Care in Licensed Specialized Residential Setting		T1020		Days	276	72,573	\$2,148,724	\$7,785	\$30	263
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	170	39,192	\$2,507,334	\$14,749	\$64	231
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	22	5,823	\$536,455	\$24,384	\$92	265
Assessments		T1023		Encounter	0	0	\$0	\$0	\$0	0
Enhanced Medical Supplies or Pharmacy		T1999		Items	0	0	\$0	\$0	\$0	0
Transportation		T2001			0	0	\$0	\$0	\$0	0
Transportation		T2002		Per Diem	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2004			0	0	\$0	\$0	\$0	0
Transportation		T2005			0	0	\$0	\$0	S0	0
Fiscal Intermediary Services		T2025		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2028		Items	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		T2029		Items	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2036		Encounter / Trip	0	0	\$0	\$0	\$0	0
Community Living Supports-Therapeutic Camping		T2037		Encounter / Trip	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Month	143	11,915	\$130,462	\$912	S11	83
Enhanced Medical Equipment-Supplies		T2039		Items	0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL		<del></del>	0	0	\$0	\$0	\$0	0

Total Population and Cost					7,440		\$52,500,119				
Macomb Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case	
CMHSP Cost Data by Service Category			Adults with M	Iental Illness	Fiscal Year 2006-2007				State of Michigan		